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Institutes of Medicine.

EXCURSIONS IN THE DOMAINS OF THE PHYSIOLOGICAL MEDICAL SCHOOL.

By CARL BOJANUS, Sr., M.D., Samara, Russia.
CORRESPONDING MEMBER AMERICAN INSTITUTE OF HOMEOPATHY.

FIRST PAPER.

'S war einer dems zu herzen ging
Dass ihm der Topf so hinten hing,
Er wollt es anders haben . . .
Da hat er schnell sich umgedreht,
Er dreht sich links, er dreht sich rechts
Der Topf der hangt ihm hinten . . .
Und wie er steht er annoch steht
Der Topf, der hangt ihm hinten.
—Adalbert von Chamisso.

(There was a man who took it very much to heart that his pig-tail was hanging at his back; he wished it turned another way, so he twisted himself swiftly round, first to the right, then to the left, but the pig-tail would not change its place, and so he remains standing to this very day with his pig-tail hanging at his back.)

I.—CHOLERA THERAPEUTICS.

I have been intending for some time past to submit to critical analysis the different new remedies and curative methods brought forth by the cholera epidemics which have visited so many parts of the European continent in 1892 and 1893, in a series of articles for the Medical Century, but my original intentions have been thwarted by the fact that the materials for an impartial illustration have already been collected, and, strange to say, in the very bosom of the physiological school itself. And it is there that we find a severe and impartial condemnation of the motley confusion which has been going on in the fields of pharmaceutics. So, instead of attempting to gather all the data myself, I will submit to review and dissection the fallacies and worse than useless treatments of the physiological school, as portrayed by able men of their own denomination.

The pamphlet which, from our point of view, has a right to be first mentioned in this series of articles, was written by Dr. S. Koritchenko-Ambodik, a physician belonging to the staff of the Medical Military Academy in St. Petersburg. He belongs, according to his own therapeutic faith, to the followers of the expectative method of treatment, popularly called nihilists; although, strictly speaking, he ought not to be counted as one of them as he does not reject the use of some simple but efficacious remedies; he also gives due place to hygiene.

It is extremely rare to hear of a sober and unbiased judgment pronounced by a follower of the physiological school in condemnation of the deeds of his own brethren; it is therefore a pleasure to seize upon such an article as the one of which I intend to give an extract; it brightens up the gloom of the current medical journals, and lights up, if it be only for a moment, the confused vortex in which the medical faculty of the old school is plunged. Such confessions, openly avowed, are particularly precious to us; they shield us from the reproach which has often been made to us, of finding nothing good beyond the precincts of our own school; for we have heard this said whenever, prompted by a love of truth, we have protested against the wretched therapeutic systems of the reigning school.

The above mentioned article bears the title of "Treatment of the Indian Cholera with Injections of Water, or Enteroclysis." (*Wratch*, 1892, No. 36, 37, pages 903 and 932.) It begins with the paragraph entitled "Dangerous Symptoms" and describes the symptoms of the *Stadium algidum*. The next paragraph, "Animation," treats of the striking effects of injections of distilled water in the veins. These were applied sixty years ago in Russia by Markus, Tenichen, Landras and Wolff, and in France by Magendie; incrassation of the blood was the indicatory symptom for the use of this remedy.

The next paragraph, "Disillusion," speaks of the very transitory and short relief given by this proceeding; the following paragraph, "A Ray of Hope," treats of the subcutaneous and intraperitoneal injections of water, introduced by Buchanan in 1848 and practiced later by Feilchenfeld, Tibaldi and Richardson; these injections were abandoned, notwithstanding their striking efficacy, for fear of their producing "mortification of the skin and subsequent illness of the peritoneum."

In the paragraph, "Revival of Water Injections," the author says that they were again taken up in 1866, by Beigel, later by Guning, Cantain, Michael, Cameron, and in 1883 by Samuel. There is nothing important to report about the paragraphs entitled, "The Apparatus, the Simplified Apparatus," (constructed by the author of the article) and "Technique and Particulars." In the latter, the author speaks of the quantity of water to be used and tells what ingredients have to be added, such as salts, *Natrum carb.*; all this is more or less known to all, and need not be commented on.

I pass on to the paragraph, "Indications." Samuel and Cantans consider that in copious diar-

rhea without collapse it is indicated; whereas experience has shown that the injections are quite ineffectual in the last stage of cholera. I pass over without comment the paragraph, "Consequences of Injections;" they are well known. In the paragraph about "Disagreeable Accessory Effects" we find, on the authority of Cantani: aggravation of the dispnoea, paralysis of the heart, and last of all abcesses; in the paragraph "Causes," it is said that the formation of abcesses is to be attributed to a condition of the skin similar to that observed in diabetes.

In the following paragraph, "Injuriousness of Mustard Plasters," the author advises the use of warm compresses instead of mustard plasters. In the paragraph, "The Language of Ciphers," the per cents of mortality are discussed. It appears that every author has his own manner of counting, so that there are fluctuations between 7%, 70% and 100%; it is, therefore, impossible to draw any definite proof of this in the paragraphs, "Critical Illustrations and False Calculations."

"Diarrhea is not the most dangerous symptom of Cholera." In this paragraph the author demonstrates, that the cholera is at its worst when the attacks of diarrhea and vomiting are trifling; according to the observations of Magendie, the prognosis is most alarming when the diarrhea is insignificant.

In the paragraph "Revival Through Bleeding," the curious fact is mentioned that venesection calls forth an effect similar to the injections with water. It follows, therefore, as proved in the paragraph, "Artificial Diarrhea," that the incrassation of the blood is not the only source of danger. According to the observation of Richardson the diarrhea increases after every injection and as the collapse returns at the same time, he exclaims in despair: "It is a vain and cruel proceeding to revive a corpse for a short time, and then let it die in suffering and full consciousness. We have given up our experiments, for our science gives no results and it is like playing tunes with broken strings;" so, adds the author, "we have come to the state of the Danaides, *of drawing water with a sieve;* we excite the activity of the heart, still it comes to a full stop, and we remain moving around in an enchanted circle; we are however so far enlightened as to recognize the injuriousness of too copious injections which increase the diarrhea, a fact ascertained by Keppler; on the other hand, small injections overthrow the theory of incrassation of the blood and are inefficient without the benefit of warmth. Applied simultaneously with small injections this proceeding simplifies the method of Keppler and is accessible to every patient. The conclusion to be drawn is that injections do not attack the original cause of the disease and are only at war with its consequences; they can only prove useful when there is no material alteration of the organs, such as fatty degeneration of the heart, and then only if warmth is applied at the same time and the injections are regulated according to the intensity and character of the symptoms.

In the paragraphs, "Disinfection of the Intestines," and "Chase after Disinfecting Remedies," the author shows us the uselessness of all these proceedings. He says that *Calomel*, the favorite remedy recommended by Ziemssen and many others, has found so many admirers that only thanks go out to the medical celebrities who have put it into fashion. He says also that the enteroclysis of tannin, mixed with the white of an egg and a decoction of *Chamomilla*, and sometimes a dose of *Opium*, are supposed to act antiseptically, antiphlogistically and poison the microbes by their astringency and their reaching as far as the stomach. In the paragraph entitled "Observations upon the Enteroclysis," it is said that Lutsig records 49 and 41 and according to his own special calculations 33 per cent. of mortality. The author finds disinfection a very important condition so far as it admits of no mixture and only *one* remedy can be used at a time, although in large doses. He expresses, nevertheless, his doubts on the subject, as, to this day, all these remedies have been and are still used upon no other foundations but that of theoretical calculation; we know, however, for certain, that these remedies have an injurious effect upon the heart, bowels and other organs and that we do no real good to the patient; but this does not stop us and we console ourselves with the hopeful words: "Gray, friend, is all theory." As long as the spores of the comma bacillus remain unknown to us, a point upon which Pettenkoffer is quite right to insist, it is impossible for us to know the origin of the disease; we are also in complete darkness as to the connection of the bacilli with the different regions of the intestinal canal, the ferments which they contain, and the blood itself. Therefore the results can be no other, but an incorrect application of a theory, however clear and plausible it may appear at first sight; we know for certain, that an irritation of the intestines is already at hand before the illness breaks out; it is heightened by the migration of the bacilli, and if a new irritation is added under the form of a disinfecting remedy will it not be too much, and is not the harm greater than the benefit? After what history teaches us of tuberculosis, diphtheria, scarlet fever, measles, typhus, Jaccuard has not exclaimed in vain that "in the battle against micorbes the patient himself is forgotten." If we count over all the series of experiments tried in the cholera we find the same deadly weapons.

We are obliged to acknowledge with regret that the administration of *Calomel* has been followed by the most disastrous results, attaining a mortality of nearly 100 per cent. *Calomel* makes the cholera decidedly worse, even if 500 grains have been given in three days. Small doses had the same fatal results—all the patients died. I cannot abstain from repeating here the verdicts pronounced by several celebrities of the medical world. Hughes says: "I believe that not a single patient ever recovered from the treatment with *Calomel* in small doses, frequently repeated; the results were so evident that during my visits to the hospital, wherever I saw *Calomel* at the patient's bedside I looked forward to his speedy end; and I am sorry to say that I have scarcely ever been mistaken."

Golding Bird owns that he has "never seen any good effects from *Calomel*, and whenever the patient has recovered it was in spite of the remedy."

Horner also tried *Calomel*, but the mortality increased to such a pitch that he was in danger of losing his practice. According to the statistics of

the English Board of Health, the mortality for *Calomel* treatment is 73.9 per cent. In other European countries the mortality for *Calomel* treatment is 62 per cent., whilst the expectative method shows only 20 per cent. of mortality. Those are the melancholy practical experiences, called forth by the ideal disinfecting remedy, which, according to Ziemssen, so quickly arrests fermentation and is not irritating. I therefore repeat, If Ziemssen is to be made responsible again: Such is the triumph of neutrality.

For all the harm committed, we find it due to observe that he is neither the first, nor the only one, who has recommended the remedy. I remember very well that in 1848, in the government of Tchernigoff, where I had, during the cholera epidemic, a district of 96 villages under my care, the landed gentry of the neighborhood used to get whole cargoes of *Calomel* powders with *Opium* from Moscow, where they had been prescribed by the doctors. I also saw the results of this treatment; all those who had taken *Calomel* had the typhoid form of cholera, which was not general during that epidemic, and which was only observed in those exceptional cases, and all the victims of the typhoid cholera died without exception. At that period there were already many voices raised in warning against *Calomel* and *Opium*. In 1848 von Zeimssen was only 19 years old and had probably just entered the university (Greifswald); he was, therefore, no medical celebrity at the time, nor could he have taken upon himself to recommend any remedy. Therefore, if he has praised up *Calomel* it must have been reported much later.

The inactivity of the expectative method gives as a result 20 per cent of mortality. Griesinger and Lebert both express the opinion that "energetic interposition" is always more injurious than a single unpretentious treatment.

"The *Tannin* recommended by Cantani for enteroclyosis has been found unservicable and irritating by Rosentein and Rossbach, who have proved that *Tannin* does not narrow the vessels, but enlarges them, therefore it cannot act antiphlogistically. Lutzig has also made experiments which have convinced him that disinfection of the intestines is impossible; the doses must be so large as to poison the patient. According to his opinion and to the experiments made in the John Hopkins University, *Calomel* and other antiseptics are not serviceable as disinfecting remedies, because they coagulate the albumen and become insoluble before they have produced any effect.

"The rinsing or washing out of the intestinal tube with warm water, 40 to 45 degrees Celsius, was applied in the time of Hippocrates in cases of sparodic cholera; it was also successfully used by Eisenmann and others during the first epidemic of cholera in Europe. The reason of this is that the fecal matters accumulate frequently in the intestines of healthy people and makes sewers of it; there ensues irritation which causes diarrhea, and one finds nothing to do but to stop the passage with *Opium*.* One has therefore at the very outset of cholera to fight with the fecal matters, accumulated in the intestines, and this is done with different varieties of cholera dróps, which all, without exception, contain *Opium*. It is curious that savages who live beyond the pale of medical skill instinctively take oil in the beginning of cholera; the Russian peasants do the same; but what is still more extraordinary is, that the inspiration of sound common sense has no effect upon civilized people. Notwithstanding the assurance to the contrary of several observers, the height or the enteroclysis does not extend in most cases beyond the coecal valve."

I pass without comment "The Technical Part of the Enteroclysis" and only take note of the author's words, "There is no reason to doubt the benefit of warm enteroclysis." In the "Conclusion" he calls attention to the extraordinary pretention of Cantani, who attributes to himself the merit of having been the first to recommend the use of enteroclysis; whereas his merit, if it can be called one, consists in having endeavored to stop the cholera by means of enteroclysis with *Tannin;* his assertion that the large and small intestines are both washed out by the enteroclysis is not founded upon experience, but upon an exception which occurred with a hysterical patient; therefore it has no scientific worth. The most rational proceeding is to use the enteroclysis with a solution of one per cent. of salt, or the artificial serum, applied by Gallards. The author sums up the whole by saying "that history shows us how many remèdies have been tried, and with what little success.

The expectative method is the one which till now has given the best results, therefore it seems more rational to keep, for the present, to single and innocent remedies. The cholera by itself is undoubtedly much less an object of terror than the prejudices of humanity, for it is, thanks to those prejudices, that the uneducated and superstitious become the victims of panic terror.

* This reminds us of what has been said by Dr. Granvogl in his posthumus article, entitled "Keprostace."

Surgery.

TWENTY YEARS OF SURGERY.

By CHARLES A. MORLEY, M.D., Detroit, Mich.
MEMBER MICHIGAN STATE HOMEOPATHIC MEDICAL SOCIETY.

In a single generation a new surgery founded upon definite principles of great precision has had its growth. The experimental methods have won in every field, with the effect of closure of many of the problems of doctrinal pathology, forever. At the same moment an host of new problems have been opened up along the line of the new methods, and many of the time-honored rules of practice must now be discussed in a new light. Such seems to have been the law of progress always.

Experience has not been the cause of this growth; its source has been extra-professional, intellectual and secular. The past generation had a vast experience of the casualties of war attracting the attention of the world to the process of repair; but the fabric of preconceived opinion concealed the true order of things from view. The spirit of the age touched this fabric and revealed its insufficiency. This is the spirit of pure observation, rational experiment and scientific deduction.

In the light of that age the commonplace and

familiar were simple no longer, for it was seen that in Nature fact joins fact in endless unity.

THE INTELLECTUAL ADVANCE.

Darwinism and the doctrine of evolution occupied the controversial field in scientific thought. The controversy occasioned by the revival of the ancient doctrines of a living contagium and that of spontaneous generation brought home the method of physical investigation to the door of medicine and surgery.

Darwin, Agazzis, Tyndall, Pasteur, Haeckle and Koch, Claude Bernard and Virchow, together with a grand army of naturalists and physicists of only less celebrity, have each contributed to the intellectual advancement which made the deductions of Lister possible; and without detracting from the glory of his great achievements it must be recognized that but for the steady march of scientific investigation along his pathway Joseph Lister and antisepticism had been unknown to fame and the sum of human sufferings would have remained without remedy.

The theory of putrid infection maintained by Semmelweiss, at Vienna, in 1847, had been bitterly opposed and cast upon the sea of forgetfulness.

Pyemia, septicemia, hospital gangrene, hospital erysipelas and phlegmonous inflammation brought the idea almost within the grasp of the military surgeons, but the theory of inflammation stood in the way. The intelligence of soldiers who had seen a different practice and the humanity of surgeons cried out for "supporting" instead of "lowering" measures in these cases, and so finally the lancet and mercurials were withheld.

The old idea of phlogiston or an inflammatory substance in the blood that produced the flame of inflammatory action had to be abandoned and the whole doctrine of inflammation modified and re-stated.

The labors of Recklinghausen, Cohnheim and Virchow combined to make this possible.

Inflammation, therefore, was said to be a disturbance of the nutrition of a part, always primarily in the direction of excess.

THE STUDY OF FERMENTATION.

Although the principle of antiseptics had been distinctly stated as early as 1868 it scarcely gained a hearing for a full decade, and another decade had almost passed before its general acceptance, even tentatively.

Chemists and physicists worked out the problem of fermentation and laid the broad foundation for antisepticism. The idea that the air or its oxygen was the cause of fermentation was prominent in the minds of all investigators and they recurred to it again and again.

Schultz showed in 1836 that oxygen washed in sulphuric acid would not cause fermentation when afterward brought in contact with fermentable fluids.

Schwann in 1837 passed air through a bent tube in a flame and found the air sterile.

Schrader and Dusch in 1854 filtered air through cotton plugs with the same result.

Pasteur in 1859 demonstrated by a flask with a bent neck, which allowed the atmospheric dust to deposit in it, that pure air would not act as a ferment.

THE DISCOVERY OF FERMENTS.

Although Pasteur discovered (1857) that a living ferment was constantly present in the lactic fermentation and then in the butyric and putrefactive fermentations, he was opposed by the leading men of that time; but he boldly re-affirmed the ancient doctrine that putrefactions were caused by living ferments.

Liebig led the opposition with his powerful influence, affirming that the fermentation is a phenomenon of living matter due to the instability of complex molecules under favorable physical conditions.

THE SCIENTIFIC PLANE ASCENDANT.

The rapid progress of Pasteur in the discovery of the special micro-organisms that produced each variety of fermentation, culminated at this time in the total destruction of the theory and in re-affirming with confidence and experimental proofs that "All life is from former life."

In the meantime Joseph Lister had undertaken to prevent putrefactive change in wounds by keeping out the germs in the atmosphere and by destroying their vitality.

There can be no question that Lister's idea was to kill the germs in the air, and then by his dressings to keep them from the wound. He reasoned that without seed there could be no crop and that was the true idea of the spray.

THE CARBOLIC ACID TREATMENT.

Those who twenty years ago tried the *Carbolic acid* treatment were often disappointed. Open wounds and compound fractures did very well indeed, but closed wounds were too often infected wounds.

Painfully, slowly and in disappointment another idea gained recognition. It was to remove the soil and destroy the seed and thereby prevent a crop.

FERMENTATION—A SUMMARY.

1. Accidental notice of "yeast globules" (Leeuwenhoeck, A.D. 1680, looked upon them as grains of starch metamorphosed).
2. Discovery of the yeast plant. (Latour and Schwann independently in 1837.)
3. Demonstration by improved microscopy of the fact of growth and propagation.
4. Demonstration that the plant absorbed oxygen and gave off carbonic acid.
5. Discovery of other ferments and fermentations stimulated by the commercial interests.
6. The spontaneous generation controversy and the firm establishment of the idea that all life is from previous life.
7. The elevation of the whole subject to the plane of pure science, constituting a department of biology, and a thorough observation and record of the life history of micro-organisms.
8. The revival of the ancient doctrine of a living contagium. ("Contagium Vivum.")
9. The effort to exclude air from wounds on the theory of the agency of oxygen in producing fermentative change—followed by the negation of the notion by experimental proof that pure oxygen or filtered air would not set up the fermentation—a line of thought accounting for the spray and the dressings of Lister.
10. Discovery of "spores" or the seeds of vegetable micro-organisms which float in the air and lodge everywhere.
11. The idea of "dust and disease" and "man's combat with an affected atmosphere."

12. The discovery of micro-organisms in material for sutures, ligatures, dressings, on the hands, under finger nails, everywhere.

13. The search for chemical antiseptics.

14. The application of the principles for sterlizing organic infusions to dressings.*

INFLUENCE OF THE DISCOVERY OF MICRO-ORGANISMS.

Then came the laborious battle for details—the material for ligatures and their preparation, the preparation of the operative field and of the hands and person of operator and assistants, the preparation and care of dressings and instruments.

The arrest of bleeding and oozing, the careful suturing of tissue to tissue, the removal of the least particle of moisture and the burying of the wound-line in a dry antiseptic powder with every suture having an absolutely even tension, and the incasing of the wound in abundance of light dressing of aseptic and antiseptic history. Then and then only came true success and with it the force and power and triumph.

The vast clinical significance of asepsis, no less than its far reaching influence upon the problems of surgical pathology, from which the general principles of surgical science must be deduced, would seem to place its consideration in the foremost rank of the principles of surgery, and this is true also in relation to therapeutics. Asepsis has practically done away with "inflammatory action" itself.

And should there occur inflammatory action the attention is first directed to the local condition and the removal of *materies morbi*, and not to the dependent general or constitutional phenomena. The principles of surgery hitherto based upon a doctrine of "inflammation" are fast becoming obsolete, and in their place the surgery of to-day has put the principles of antiseptics.

The ideal of surgery being to secure surgical repair with the minimum of material interposed between surgical surfaces, all that art can do is accomplished in the operative procedure and the dressings.

THE LEGITIMATE ROLE OF THERAPEUTCS.

But having done all that art can do there remains to be accomplished the regeneration of tissues; and this is a function of living matter dependent upon the favorable performance of the general bodily functions.

To deny the value of therapeutics in this light would be to deny it under any and all circumstances. And there is an especial sense in which the resources of materia medica count for much in the issue of life, both in the preparation and after treatment of surgical patients.

THE PREPARATION TREATMENT.

From the standpoint of Clinician, the basis of therapeutics, must rest upon the following considerations, namely, to wit:

1. "All life is from former life."

2. All cells are from former cells.

3. To get repair there must be generation of tissues.

4. To get generation of tissues there must be reproduction of cells.

5. To get reproduction of cells there must be cell vitality.

6. Cell vitality depends on general vitality.

7. General vitality depends upon the due performance of the several vital functions.

8. The vital functions are immediately concerned with a proper balance of waste and repair, specified as nutrition.

9. Repair may be modified by modifying general and local nutrition.

10. To modify general and local nutrition and thereby influence cell reproduction and regeneration so as to secure repair, both general and local therapeutics are available.

The evils of civilization often demand the therapeutical application of the principles of hygiene, sanitation, dietetics and hydro-therapeutics.

Sunshine, air, water and food are the most powerful therapeutical agencies; and when made use of along with appropriate exercise and rest medicines will be rarely required.

What medicine can compete with sunshine as a blood maker?

What better solvent and depurative can be found than water?

What better tonic and reconstructive than air?

And have the chemists found a substitute for food?

The adaptation of these natural agencies may represent the wisest ministrations of our art, and familiar or simple as they seem, their efficient and timely use demands the highest knowledge of nature.

MECHANICAL THERAPEUTICS.

It is demonstrable that the tissues and cellular elements can be modified in nutrition by the transmission of dynamical energy, as rapid "vibrations" by suitable apparatus.

The influence of such vibration upon living cells has been made the subject of some experiment.

The jar of transportation renders the egg sterile. Transmuted vibrations of high pitch arrests the reproductive activity of cells in the case of the laboratory pure culture tubes; while lower rates of motion increase both the reproductive activity and the growth of such cells.

There is also some experimental ground for the belief that such mechanical energy is actually transmitted into vital energy, a view which, if true, would not be incompatible with the doctrine of the correlation of the physical and vital forces.

"Mechanical Massage," or rapid vibrations, transmitted to the tissues of apparatus, is demonstrably of the highest value in surgical and local diseases.

A Faradic battery with a double coil and vibrator attachment, capable of high rates of motion and applicable to the treatment of peripheral nerve affections, has been made by Dr. Hutchinson of New York.

The late Prof. Charcot was interested in the problem of transmitting mechanical vibration to the central nervous system for the therapeutical purposes.

Manual Massage and the Swedish movements may be looked upon as merely supplemental to the mechanical vibration principle.

ELECTRO-THERAPEUTICS.

The Faradic "Current" is simply a "to and fro"

*It was found that some micro-organisms resisted boiling and higher temperatures briefly applied, but succumbed to lower temperatures continued for hours.

motion having the effect of rapid, minute vibrations, which owing to the resistance of the human skin does not in its ordinary use penetrate to any depth. Its effects are produced by direct stimulation of the numerous motor centers on the surface of the body. For this purpose it is available and valuable.

It has been long used against paralysis and keeps up the local nutrition where there is deficient nerve supply. It has considerable value in conditions of true exhaustion employed by the general cutaneous and spinal methods. It is useful to induce uterine dilatation and as a motor stimulant to the womb in inertia and hemorrhage. It is useful in stimulating respiration and possibly cardiac action.

The galvanic current is available for surgical purposes, and in conjunction with the faradic current is available for electro-diagnosis.

By its effect upon the nervous system and upon the circulation, electricity in its several forms may be useful in the preparation treatment of a surgical patient.

HYDRO-THERAPEUTICS.

Hydro-Therapeutics are also of value, especially in cleansing the surface of the body, washing out the intestinal tract and for flushing the kidneys. The solvent action of water makes it a remedy par excellence for dissolving the waste products locked up in the tissues and in the depurative organs.

Active or passive exercise should be systematically employed at the same time to hasten the removal of waste products.

PNEUMATO-THERAPEUTICS.

Pneumato-Therapeutics are of surgical service in assisting the physiological method of preparation. The breathing or lung exercise and exercises to develop the weakened muscles of respiration are important to secure oxygenation of the tissues and also to facilitate breathing while under the anesthetic.

The exercises should aim at developing a perfectly rythmical breathing, wherein each stage of the respiratory act is completely and rythmically performed.

Inhalation of oxygen and enemata of this gas is useful in the septic state and where the breathing surface is small.

Other gaseous enemata may likewise be thus employed.

Hydrogen gas by enemata in intestinal obstruction is a recognized procedure—it is rational—and has undoubtedly succeeded in volvulis, intussusception, and possibly in some rare cases of septic paresis after operation. It is also available in the diagnosis of shot perforation of the intestinal canal.

THE VACUUM TREATMENT.

The principle of the vacuum is available for the further equalization of the circulation. It may be applied to the trunk and extremities or to small surfaces. It is known that the vacuum is inimical to life. It would be interesting to know if placing the body in a partial vacuum would tend to arrest the growth of bacteria in the tissues in cases of septic infection.

The pneumatic cabinet could be made available, especially in institutions, for the purpose of clearing out the lungs and for their expansion and exercise, while the vacuum of the cabinet would in connection with the breathing exercises tend to improve the circulation and the heart's action.

THERMO-THERAPEUTICS.

Heat and cold have had a varied application in all ages.

The actual, potential and galvano-cauteries have a limited well defined use.

ARTIFICIAL TEMPERATURE.

For the preparation treatment temperature is important. Each individual being a law unto himself as to temperature, it follows that no fixed rule can be formulated; but it is also true that the temperature of the air we live in has an important effect upon our vital functions.

Artificial heating and cooling becomes of great importance in institutions. It is of great importance in many cases.

The tonic effect of cold properly applied to the surface of the body is only equalled by the sedative action of heat so applied. The value of cold as an antipyretic can hardly be questioned. There is some ground for thinking that topical chilling with ice is capable of arresting the activity of certain bacteria.

It is applied in bags on the surface or injected as ice water, or run through rubber coils placed on head, trunk or extremities.

THE PRINCIPLE OF REST.

It is only necessary to mention the great principle of Physiological and Mechanical Rest, so clearly stated by Hilton.

The principle finds in the new surgery a newer and higher application in the methods of wound closure and of the dressings as well as in the postural treatment.

The principle of exercise is as closely related to that of rest, in vital mechanics, as in the question of waste to repair.

So in a very large sense exercise is one of the means of attaining physiological rest, for by it the vital functions are maintained.

POSTURAL TREATMENT.

The indications for increased blood supply, or a dimished supply, may in part be met by postural treatment. A fracture un-united may go on to union by arising and going about, thus giving more blood to the part, while an ulcer of the leg will heal best in recumbancy, and in some cases by slinging it high up.

In the feeble and in age postural treatment is necessary to prevent fatal hypostatic congestions.

In pelvic congestion posture and atmospheric pressure in the vagina are of signal service. Such measures are of great importance in the displacements of the uterus and preparatory to operations for these conditions.

DRUGS.

Amongst therapeutic verities coming to us through two thousand years of empiricism may to-day be named, *Mercury* in syphilis, *Acids* in scurvy, *Opium* for pain and *Quinine* in malarial intoxication.

Science has added,

Arsenic, in septic and toxaemic conditions.

Phosphorus, as a reconstructive of the tissues.

Arnica, in traumatism.

Hypericum, in traumatic affections of sensory nerves.

Rhus tox, in traumatism of fibrous and muscular tissues.

Silicia and *Hepar sulph.*, in suppuration.

Hamamelis, Phosphorus and *Pulsatilla*, in phlebitis.

Calarea carb., Calcarea phos. and *Silicia*, in faults of evolution.

Bryonia and *Sulphur*, in affections of serous surfaces.

Apis, Arsenicum, Belladonna, Rhus, in acute cutaneous affections.

Arsenicum, Mercurius, Rhus and *Sulphur*, in chronic cutaneous affections.

Aconitum, Belladonna, Kali bich., Mercurius, Pulsatilla, Sulphur, in mucous and catarrhal affections.

Nux, Ipecac, Bryonia, Mercurius, Pulsatilla, in gastric affections.

Mercurius, Belladonna, Conium, Iodine and compounds in affections of the glandular system.

Hyosciamus, Ignatia, Nux vomica and *Platina*, in mental and emotional states.

Nux and *Sulphur*, in hemorrhoidal patients.

Iodine and *Calcarea*, in goitrous patients.

Thuja, in the gonnorrheal patients.

Apis, Arsenicum, Belladonna, Rhus, in affections of the cellular tissues.

Phosphorus and *Hamamelis*, in the hemorrhagic patient.

Aconitum, Belladonna and *Ferrum phos.*, in congestions.

China, Ferrum and *Veratrum alb.*, after blood loss.

Lycopodium, Nitric Acid, Buchu, in calculous disturbances of the urinary tract.

THE DEBT OF SURGERY TO THERAPEUTICS.

This catagory might be indefinitely extended but in brief it serves to illustrate the debt surgery owes to general therapeutics. The method by "the totality of the symptoms and lesions" is entitled to all credit for having defined their indications and placed their use upon a secure foundation.

Hypodermic and endermic medication, as well as the application of certain remedies through the nasal tract, the rectum and the peritoneum; and, finally, the administration of medicines by inhalation are methods which cannot be ignored.

SURGICAL THERAPEUTICS.

The topical use of medicinal, chemical and antiseptic substances no longer meets with opposition by practical men, and none are asked for an apology for exercising the utmost liberty of opinion and action. The contrary course would arrest progress and prove "the grave of science."

The hypo-dermatic exhibition of *Morphine, Atropine, Nitro-Glycerine, Strychnine, Pilocarpine, Hydro-chlorate, Whisky, Brandy, Sulphuric Ether*, belongs to the newer surgery.

Arsenic, Quinine and soluble mercury may be sometimes thus used with advantage.

Intravenous injection of physiological salt solution has superseded the attempts of twenty years ago at the transfusion of blood.

EXPERIMENTAL THERAPEUTICS.

The hypodermic injection of certain organic extracts belongs properly to the field of experimental therapeutics. It, however, challenges the attention of surgeons, particularly in surgical tuberculosis, rabies, lupus, anthrax and in the experimental treatment of cancer, by the pure culture injections of the microbe of erysipelas.

Treatment by *Tuberculium* hypodermically of surgical tuberculosis has yielded some gratifying results. Endermic medication is worthy of more attention. Alcoholic solutions of *Quinine*, Dry Salt frictions, *Acid, Sulphur* and mineral baths, each have their appropriate place.

Inunctions of oleates of both mineral and vegetable remedies are also very eligible methods of application. There is some evidence that certain metallic medicines like mercury and iodine can be made to traverse the tissues, both normal and pathological, by the galvanic current. The idea is based upon the electro-affinity of metals. Thus an electro-negative metal should be placed under the positive pole and included in the circuit where it is desired to deposit it.

The doctrine of "the vital force" with its reliance solely upon internal medication, based upon the assertion that so-called local diseases are but manifestations of a disturbance in "the vital force" that can alone be truly cured by the internal remedy, has its share of responsibility for blocking the wheels of progress.

Although bristling with error a surgical therapeutics has been created by those who have adopted this extreme view. Volumes have been written on indications for remedies in "vaginal discharges" in cancer, stone, ovarian tumor, uterine displacments, piles, fissure stricture, as well as every known surgical condition curable or incurable. Yet in good common sense there never was a verifiable indication for ninety per cent. of these remedies.

The method by "the totality of the symptoms and lesions" is adapted to treat the patient but not his pathological anatomy; so it is clear that such a misuse of remedies rests upon empiricism and is worse than empirical.

There are no "remedies" then for slivers in the finger, none for flexions, dislocations and foreign bodies; none for incurable diseases and none for unrepaired injuries.

OPERATIVE TREATMENT OF INGUINAL HERNIA.

BY W. K, BONTON, M.D., MELBOURNE, AUSTRALIA.
HON. SURGEON MELBOURNE HOMEOPATHIC HOSPITAL.

The radical cure of hernia is a subject which has been and is of the greatest importance to both surgeon and patient. To the surgeon, that he may in the safest and most perfect manner promote a cure; to the patient, in entire restoration from a weakness which in many instances makes life a burden. When we think of the many who suffer from this complaint being thereby rendered incapable of following the more laborious forms of employment, the inconvenience of having always to wear a truss, and the constant danger of strangulation attending this trouble, we are prompted to exercise our best efforts for perfecting as far as possible the various methods employed. It is also necessary to make use of all the ingenuity which we may possess at the time of operation, and certainly there are few operations where natural ability can be better brought into effect than in the one for the radical cure of hernia.

In the hands of the careful, thorough, ingenious

man success is assured in most cases, and the mortality is exceedingly small under the present advanced methods and position of surgery and its adjuncts.

Great care and attention should be given to the preparation of the patient. Make physical examination of the heart and lungs. Examine the urine for any cystic and renal troubles; regulate the bowels by a saline purgative given twenty-four hours previous to operating and a plain enema prior to setting to work, thus preventing the bowels from moving for three or four days.

The pubes should be shaved on both sides; all the parts, scrotum, pubes, abdomen, thighs and penis should be well scrubbed with soap and water; then lay over the parts a towel wrung out of a 1 to 40 carbolic acid solution or a 1 to 500 bichloride solution until the operation is begun.

The incision may be made from a point interior to and above the internal ring and extending downward and on to the pubes. Some surgeons carry it down over the scrotum, but this is unnecessary unless the conditions are such that it is best to drain, and that from the lower part of the wound, as is the case in operations for strangulation. Such bleeding points as may be met with, generally from the external pudic vessels, need give but little trouble as they are readily choked by torsion. The sac may not be readily recognized, especially if the rupture is a recent one, in which case it is easily passed over. In old, long standing cases it is, however, thickened and presents an opaque, whitish appearance, and when rolled between the thumb and finger the two serous surfaces offer no resistance, giving a gliding feeling very characteristic of the condition.

In some cases the coverings are not easily separated and the fibres of the cremater as noted by some surgeons cannot be defined. However, if care is used and the separated layers lifted by forceps and divided the sac will be found as described.

When this stage of the operation is reached is where surgeons begin to differ, and from this out one may follow the direction of a Bassini, Ball, Rose, Barker or MacEwen, or his own modifications. My experience leads me to advise complete isolation or removal in most cases. Sometimes this is readily and easily done, and again it is most difficult. However, with care and practice it will at last be accomplished. No harshness should be resorted to for fear of injuring the vessels of the cord. It is desirable to open the sac before proceeding to dispose of it in order to make sure that the gut is not involved and to remove any omentum which may be present. This may readily be done by ligating in sections and dividing. Then by catching with forceps the edges of the opening already made and drawing them forward the sac is drawn from the ring, causing the loose folds of the peritoneum to be put on the stretch. The little finger of the left hand may then be passed over the sac to the junction of the internal ring, and silkworm gut ligature tied tightly around the sac at the end of the finger, being sure to leave the end of the ligature long. Then by threading each end on to a curve needle it is passed through the pillars upward and the two ends tied, thus bringing the stump into the closed ring. The suture is cut short, leaving it buried. The sac is then divided above the ligature and removed, the aponeurosis of the oblique carefully stitched with catgut and the integument brought together over all with horse hair. A pad is applied and firmly bound in place with a spica bandage which, should all go well, may be left on for nine or ten days, when it will have healed.

It has been my experience that while the above general rules may be attended to there are cases which require individual treatment differing somewhat, and in illustration of this I will submit two or three cases.

Case I.—D. C., aged 33 years. Right scrotal hernia, reducible. It is difficult to keep in place with truss; partial strangulation had taken place at different times. After careful preparation, as before described, an incision was made over the center of the tumor from the highest point of the internal ring down and onto the pubes. Each layer was carefully dissected up by picking it up with the forceps. The sac was reached and after some difficulty was removed from its attachments, drawn well out and stitched firmly into the ring with three buried, interrupted silk sutures. The sac was then cut off, leaving an inch of the stump, which was gathered in with sutures uniting the incision. The entire wound was then closed with silk sutures, no drainage, and healing took place by first intention and with nothing worthy of note other than a thickening of the tissues at the ring. After the second week he was allowed to get out of bed and go about, and though advised to wear a truss for a time, he considered that as the operation was intended to do away with the instrument he would discard it, which he did, and though two years have elapsed since the operation there has been no recurrence of the hernia.

Case II.—P. F., aged 52 years. Left inguinal hernia. Reducible. This hernia formed a tumor of the size of an infant's head. An incision was made over it, but I found great difficulty in dissecting as the adhesions were very firm. A large quantity of omentum was removed, but still the knuckle of gut was so bound down by adhesions that while it was separated from surrounding parts it was with omental attachments held in a bunch the size of a man's fist. In order to return this to the abdomen it was necessary to incise the ring upwards until it was sufficiently enlarged. The entire bunch was then returned to the abdomen after passing a strong twisted silk suture through the walls, and with a needle threaded at both ends this was passed upward through the muscle and tied, thus drawing the incision together. Two other sutures were then passed in like manner and the whole wound was closed with silk sutures. This suppurated freely but gradually filled up, leaving, after eight weeks, a small sinus, which, after thorough scraping with a Volkman's spoon resulted in the removal of a silk suture. This out of the way the sinus closed, and though twenty months have passed there is no further trouble and no return of the hernia.

Case III.—M. W., aged 42. Left scrotal hernia. Reducible. This case was complicated by a small right inguinal hernia and a urethral stricture, which latter was cured by laying open at the point of stricture. I mention the hernia on the right side as that was practically cured by the operation on the other side, consequent on drawing

the folds well out at the site of the operation. The incision was made as before, the sac was dissected well out, but in this instance the muscle and aponeurosis was so thinned that it left a ring three inches across and it was impossible to form a wall for protection, as there was no way to draw the muscular walls together. After loosening the sac I passed my forefinger through the ring and forced the knife down through the muscular wall an inch above the upper border of the ring, onto my finger. Then passing the blades of a pair of forceps through the opening thus made and grasping the fundus of the sac I drew it out through the incision as firmly as I considered advisable and stretched the sac and walls together. Then the whole bulk of the sac was spread out over the thinned wall of the ring and stitched down. The integument was drawn together over the whole and the pad applied. Healing took place by the first intention and a year and a half of active work and life has failed to develop any weakness on either side.

SUMMARY.

Then in order to meet with success the operator needs to

1. Carefully prepare the patient.
2. Be careful to denude the tissues with the keen edge of a knife and not tear with a director, forceps or finger.
3. When the sac is reached determine how it shall be dealt with, whether dissected out, as by Banks; divided, as by Barker; twisted, as by Ball; puckered, as by MacEwen; or some other modification necessary to meet the exigencies of the case, or to join the internal oblique and the conjoined tendon to Poupart's ligament beneath the cord and its vessels, as well as to sew the fibres of the external oblique in covering in the same, as advised by Bassini.
4. Neatly close the wound without drainage, applying dry dressings, well padded, and bandage firmly in order to promote close adhesion of the parts. Then, unless the temperature indicates inflammatory action, the dressings may remain intact for ten days, when the parts will have healed. In a fortnight from the time of operation the patient is able to go about, but it is as well for a few weeks that he should wear a light truss to enable the parts to gain firmness before they be put to any strain.

Neurology.

ANGIO-NEUROTIC-OEDEMA.

BY GEORGE H. MARTIN, M.D., SAN FRANCISCO, CAL.

PROFESSOR OF NERVOUS AND MENTAL DISEASES, HAHNEMANN HOSPITAL COLLEGE.

Of the many diseases affecting the vaso-motor nerves Angio-neurotic-oedema is one which challenges our attention, from the fact that it is only recently that the disease has been properly studied and classified.

The neuroses involving the vaso-motor nerves manifest themselves in many ways. The simple flushing and pallor of a part due to angio-paralysis and angio-spasm are the most common. Angio-ataxia, or the condition of irregular tonus of the blood vessels, is perhaps not quite as common as the preceding condition, and yet the irregular distribution of cold and hot areas of a part is quite common.

Urticaria and acne-rosacea are diseases of this class, but in them the trophic disturbances are more profound and of longer duration. There are perhaps no class of cases which are so little understood by the general practitioner and specialist as these which we are now considering.

Angio-neurotic-oedema manifests itself by a circumscribed swelling of a part, which comes on suddenly, lasting from a few hours to a few days, passing entirely away to be again repeated at a shorter or longer interval. During the attack the patient may be feeling perfectly well in every respect, except the sensation of stiffness and slight burning which sometimes accompanies the swelling. There may, however, be profound general disturbances, such as nausea, vomiting, headache with occasionally febrile symptoms. This swelling may occur upon the face or the extremities, or, again, upon other parts of the body, but the hands, face and lips are the most common locations for it. The swelling may be white, waxy-like, with the appearance of inflammation, or bluish. It may involve the whole face, the hands or feet. If it is situated upon other parts of the body the swelling may be three or four inches in diameter and considerably raised above the surrounding surface. The part may pit upon pressure or it may not.

It is different from urticaria in that there is no great amount of itching and there are no distinct wheals with a reddish base and whitish center; but it is more uniform in color.

The cases which I will relate will illustrate more clearly than I could tell in any other way, this peculiar condition.

Miss A., 25 years of age, consulted me in regard to a large reddish, hard swelling involving the whole right side of her face below the eye. It had been there for two days, was not painful, and in fact there was only the sensation of swelling that would indicate to her any trouble at all. She was perfectly well in every other respect and was only concerned about the appearance of her face.

She informed me that she had had a similar attack, lasting several days, about two years before, which passed away without any treatment. I examined the swelling carefully and satisfied myself that it did not arise from any irritation from a decayed tooth, or other trouble within the buccal cavity. The glands of the neck were not involved although that side af the neck was very much swollen. The line of demarcation was exactly in the median line of the face and naturally gave her a very peculiar appearance.

The patient was not of a nervous temperament, but, on the contrary, was rather phlegmatic; she had never been ill in her life that she could recollect, with the exception of the previous like attack which I have mentioned. I felt satisfied that it was a case of angio-neurotic-oedema, gave her *Belladonna* 200, and asked her to report in three days. Upon the second visit I found the swelling very much diminished, the redness had almost entirely disappeared, and her mental anxiety was very much relieved. One week later she reported perfectly well.

This occurred about two years ago, and I have

seen the person several times since, but there has been no return of the trouble.

The second case illustrates an entirely different kind of an individual, and the cause of the trouble can be more easily explained than in the first case.

Mrs. B., 40 years or age, a confirmed hysteric, was suddenly seized one evening, upon her return home from a shopping expedition, with a severe attack of vomiting and pain in the bowels. During the violent exertions consequent upon the evacuations of the stomach of its contents it was observed that her face suddenly became very much swollen, and of a purple color. The eyes were very much injected and the lips protruded to a very great extent. Naturally the patient was very much perturbed by the appearance of her face and a physician was summoned. He gave her a hypodermic injection of *Morphine* to quiet the pains and left her. The next day her face was in about the same condition as it was the night before, but it soon commenced to gradually diminish in size and in a week's time the swelling was completely gone. Her general condition during this time was an uncomfortable one. She was extremely nervous not only on account of the condition of her face but from the fact that she was very much exhausted by other troubles. She was subject to fainting spells and many other phenomena so common in hysteria.

As it is only the transient swelling of the face that I wish to speak of in this case I will not go into detail as to her general condition, but the hints that I have already given will suffice.

Two months after this first attack she had another, which was not so severe and was not accompanied by any digestive disturbances. It came on suddenly, she having awakened from a good night's sleep to discover that her face was very much swollen. She was as usual very much run down in health, but there were no unusual manifestations. The same bluish appearance existed as in the first case and the skin felt tight and stiff; no itching or burning was noticed. In two days this swelling had entirely passed away, and occurred again with diminished severity about six weeks later. There was no pitting upon pressure, but there was a decidedly oedematous appearance under the eyes. This did not last but a couple of days and since that time, which was about a year ago, she has had two or three returns of the same condition.

In this latter case the similarity between angio-neurotic-oedema and urticaria was manifest. The first attack of this patient was undoubtedly due to the ingestion of food when she was very much exhausted, but the other attacks were no doubt caused by the hysterical condition of the patient.

Mrs. D., 24 years of age, came into my office one day, heavily veiled and in a state of great mental excitement. Upon asking her the trouble, she lifted her veil and for a moment I was very much shocked. Her whole face was enormously swollen, mottled red in color, with numerous ecchymotic streaks scattered over it, and following the course of the superficial blood vessels. The eyes were almost closed by the swelling, and if I had not known the patient well I would never have recognized her by her face. She informed me that about two hours before she was seized with a severe attack of vomiting, during which this condition of the face came on. She had never had anything like it before, and was naturally very much frightened. There was only the sensation of swelling about the face, and a slight itching.

The vomiting persisted only a short time, and there were no stomach symptoms remaining. There was some general headache, and that was all. She did not know that she had eaten any thing that disagreed with her, and was feeling perfectly well up to the time the vomiting came on. She was of a very nervous temperament, but I soon had her quieted by assuring her that this would soon pass away. I gave her *Belladonna* 6 x, and told her to report the next day, which she did, when I found that the swelling had diminished somewhat.

In four days' time it had entirely disappeared. She was very nervous and irritable for weeks after this, but I kept her under the influence of *Belladonna* 6 x for a month, when she seemed to be all right.

This was three years ago, and she has had no return of the trouble. The cause of the attack was no doubt indigestion, although the patient did not think so.

Enlargement of an extremity with paralysis more or less complete is a very uncommon condition in hysteria. In these cases there is no doubt a functional irritation of the vaso-motor centers supplying the limb; but in angio-neurotic-oedema the swelling does not usually involve the whole limb, only a part.

Now as to the cause of this peculiar condition. It is undoubtedly of nervous origin, and though the patient may be perfectly well in every other respect, yet for some reason there is an angio-paralysis which manifests itself in this way. The chief predisposing causes, however, are hysteria, neurasthenia, and other emotional states, and indigestion.

Osler thinks that heredity is a common predisposing factor, but in these two cases and others which I have seen, there was no neuropathic heredity to be found that would give us a clue to the condition.

Charcot says that the causes are sometimes psychical. In the first case mentioned no cause whatever could be found. In the second case, as I mentioned before, hysteria was undoubtedly the cause.

The swelling which accompanies neuralgias is undoubtedly of this character. Gowers records a case in which all of the veins of one side of the face became terribly distended during the paroxysm of pain, and almost every physician has observed the hyperaemic condition consequent upon a severe attack of neuralgia. The prognosis in these conditions is not always favorable. A patient having had the condition once, is likely to have a recurrence of the attack, just as a person who has had a cerebral congestion, or a congestion of any part, is likely to have the condition repeated. The reason is, of course, obvious; because whenever a part has become weakened by irritation from any cause, the nerves supplying that part are consequently more susceptible to irritation than they were before it occurred. Just as nerve impulse passing along new lines has to overcome a great amount of resistence, by a frequent repetition of the stimulation over the same line,

the resistence is overcome more easily until there is actually no resistance at all. So in a diseased condition, the frequent dilatation of a vessel makes its walls less elastic, so that after a while the contractile power of the vessels is in a great measure lost, causing a more or less complete stasis of the blood in that part.

The diagnosis of the condition is easy, because there is no other disease which has transient symptoms of this character. The main point that you have to bear in mind is its similarity to urticaria, and if you do that you will not be puzzled as to the diagnosis.

It is important to be able to make a diagnosis, because it leads you to the fact that you have an unstable nervous system to deal with, and this may be the first manifestation of such a condition.

As to the treatment. The totality of the symptoms properly considered will indicate to you the proper Homeopathic remedy, and your ability to satisfy the patient that the swelling will pass away in a few days will do more than almost anything else to relieve the condition.

Materia Medica.

MIDWAY REMEDIES.

By W. A. DEWEY, M.D., New York.
EX-PROF. MATERIA MEDICA, HAHNEMANN MEDICAL COLLEGE, SAN FRANCISCO.

This title has naught to do with the "*danse de ventre*" nor with any of the attractions of the celebrated annex to the late World's Fair, doubtless so familiar to most of the readers of the Medical Century.

Midway remedies might also be called anti-alternators, for it often happens that in a given case there is great difficulty on the part of the prescriber to determine which of two remedies corresponds to the totality of the symptoms, when in reality it is found under neither but under another remedy standing midway between them. In such conditions the natural temptation is to alternate them, a practice totally opposed to scientific prescribing; for why should two remedies be alternated when neither is indicated? It is the ignorance of the midway remedy that forces one to such a proceeding. The following are only a few of the most common of this class:

Ferrum phos. stands midway between *Aconite* and *Gelsemium* in febrile conditions, while in its action on the respiratory system it stands between *Ferrum met.* and *Phosphorus*. Thus, in febrile conditions it may be differentiated from its neighbors by the pulse, which under *Aconite* is full and bounding and under *Gelsemium* soft and flowing, and by the mental symptoms, the anxiety of *Aconite* and the drowsiness and dullness of *Gelsemium*. In respiratory troubles it has the fever and plethora of *Ferrum met.* plus the oppression and dyspnoea of *Phosphorus*.

Sanguinaria is another midway remedy; in chest troubles it stands between *Phosphorus* and *Tartar emetic;* it corresponds to the stage of hepatization, and it has the rust colored sputa and the chest oppression of *Phosphorus* and the livid face, the rattling cough and the fullness of the chest, as if surcharged with blood, found under *Tartar emetic*. It may be distinguished from both by the burning in the chest and perhaps by the circumscribed redness of one cheek.

Colchicum stands frequently midway between *Arsenicum* and *Cinchona*, especially in typhoid conditions, where it has the great debility and restlessness of *Arsenicum* and the tympanitic conditions of *Cinchona;* while in common with these two drugs it has the diarrhea, nausea and vomiting. Another distinguishing feature is the preponderance of the abdominal symptoms.

Acetic acid is another remedy which the careful prescriber will think of before he descends to the alternation of *Apis mellifica* and *Arsenicum* in dropsical affections. It has the waxen appearance, the dullness and the anasarca of *Apis*, but it has thirst; it has a greater preponderance of gastric symptoms, such as sour belching, waterbrash and diarrhea, than has *Arsenicum*, and it fits in admirably between these two remedies oftentimes.

Cadmium sulph. is not a frequently used remedy but sometimes it dovetails in between those great polychrests *Arsenicum* and *Bryonia*. In a case of gastric trouble with all of the symptoms of *Arsenicum* but the restlessness, there being, on the contrary, a desire to keep perfectly still and a decided aggravation from motion, then *Cadmium* may be studied, to step in and fill the totality bill.

MATERIA MEDICA MELANGE.

By W. A. DEWEY, M.D., New York.
EX-PROF. MATERIA MEDICA, HAHNEMANN HOSPITAL COLLEGE, SAN FRANCISCO.

Verified Remedies in Migraine.—Dr. Moeser, an Alsatian Homeopathist, writes in the *Monatsblaetter* as follows: For Migraine *Belladonna* is mentioned as the first remedy. In fact, its symptomtology speaks perhaps more frequently for this remedy than it will really be of actual use; especially is this true for the pressure of blood towards the head. The great susceptibility to light and noise also recalls the *Belladonna*. From my experience, however, I give two other remedies preference; these are *Gelsemium* and, before all, *Sanguinaria*. In *Gelsemium* also we find great excitement of the nervous and vascular systems. Especially in very irritable, hysterical women, where at the same time there is present congestive cerebral conditions, is *Gelsemium* (12 to 30) preferable to *Belladonna*. A difference between them may also be noted in the pupils, which are contracted in *Gelsemium* and dilated in *Belladonna*.

Related to *Gelsemium* and still more to *Belladonna* is *Glonoine*. This has violentcongestions of blood to the head, especially shortly before and during the menses with cardiac and arterial excitation. If this excitement be due to psychial and physical causes then is *Glonoine* all the more indicated. If the emotional excitation be one of joy and the hypersensitiveness of all the organs of sense be present and the patient be unaccustomed to coffee drinking, or, still better, cannot bear coffee or has an aversion to it, then *Coffea* in the higher potencies will give relief.

I have just mentioned *Sanguinaria;* this and *Iris versicolor* are with me the most certain acting remedies. The pain calling for *Sanguinaria* comes generally in the morning, begins at the occiput with great intensity and settles itself over the right eye; and here also can neither light nor the

slightest noise be borne; the head is pressed firmly into the pillow and this pressure brings some relief. Finally vomiting of food or bitter mucus occurs. The gastric symptoms are more prominent under *Sanguinaria* than in *Belladonna*, *Gelsemium* or *Glonoine*. This prominence of gastric symptoms is much stronger marked under *Iris;* here we find disturbances of the stomach, intestines and liver. The headache of this remedy is on the left side and the *Iris* patient is better from walking about and worse from keeping quiet.

There is still another remedy which though seldom used has proved itself very valuable, and that is *Niccolum sulph.* in the lower triturations. The pain is worse in the forenoon between 11 and 12 and the violence is so great that it forces the patient to cry out, it commences on the left side and goes over to the right side and disappears towards evening.

Vinca Minor in Diphtheria.—An old woman living in Munich had such a reputation in curing diphtheria and other throat troubles that the remedy was about to be bought by the authorities for 100,000 marks, when a Munich physician discovered that it was simply *Vinca minor* and the sale fell through. However, the remedy had cured over 60 cases of diphtheria in Munich. It shows in the meager proving that we have of it the possibility of its being used in diphtheria; it has sore throat, difficulty in swallowing, feverishness, hoarseness, stoppage of the nose by ulcerative processes, weakness, ulcers in the mouth, bad taste, etc. Several German Homeopathic physicians have verified its use in diphtheria. Perhaps a thorough proving will develop a valuable throat remedy.

Another recent discovery of the Allopathic school is the use of *Cimicifuga* in dysmenorrhea, menstrual difficulties, ovarian pains and nervous depression.

Terebinthina is sometimes a remedy for hives brought on by eating shellfish. *Urtica urens* is the remedy probably most often thought of for this condition.

Picric Acid is found to be an excellent remedy in recurrent styes in broken down constitutions, especially of brain workers.—*French.*

Dr. William Boericke in the December number of the *Homeopathic Recorder* relates the peculiar effect that *Theridion* 30 produces upon him whenever he takes the same, and an interesting test wherein he was given ten vials one of which had been saturated with *Theridion* and the rest with *Alcohol* and his success in determining the vial containing the *Theridion*. The peculiar symptom produced each time that the remedy was taken was a persistent stinging pain in the left side over the anterior aspect of the spleen.

Chenopodium tincture is reported to have cured a case of epilepsy caused by the iritation of intestinal worms.—*Ghosh, in Recorder.*

Natrum nitricum is used extensively by some German Homeopathists in influenza. They use it in the first stage instead of *Aconite*. There is a short pathogenesis of its action in Stapf's Archives, but it is far from complete.

A Migraine can never be cured if the patient does not give up coffee entirely while under treatment. The old Homeopathic rule of giving up coffee while under treatment for migraine is very important, else the treatment should be commenced by giving the Homeopathic antidotes to coffee, such as *Opium* and *Ignatia*, especially when constipation results from its use.—*Moosa, in Monatsblatter.*

Chelidonium 6, 10 drops three times a day, cured a case of beginning cataract. This remedy is an old and celebrated one in diseases of the eye. It was mentioned by Dioscorides, who died 64 B. C.—*Monatsblatter.*

Practice of Medicine.

THE HYGIENE OF THE CLIMACTERIC.

By ASA F. GOODRICH, M.D., St. Paul, Minn.

The climacteric, or change of life in women, presents undoubtedly one of the most interesting subjects offered to the physician in the practice of his profession, not alone on account of its protean manifestations but for the skill and watchfulness required to pilot a woman safely across this stormy sea of change and distress into the haven of the "post-climacteric period." I do not propose in this paper to treat of the numerous causes of suffering nor of the various physiological or pathological changes which take place during this period, as they are familiar to all practicing physicians, but will confine myself to the one subject of the hygienic care of the woman during this period.

It is not every woman that is confronted with serious danger during gestation, and not every one has to suffer during the change of life. Every thing conducive to good health diminishes the danger of these periods. Close attention should be given to the diet. All climacteric patients are better off without much meat; in weak and neurasthenic cases the almost exclusive use of a vegeteble diet combined with the various gluten preparations and unfermented grape juice will be found very beneficial. In cases where there is a tendency to constipation ripe fruit should be freely used. As a rule stimulants should be avoided; even tea and coffee should be used very sparingly, if at all.

The keeping of the skin in first-class condition is of prime importance in the treatment of the change of life, as during this period additional work is thrown on this organ by which at all times we lose more in weight than by any other emunctory. The daily use of the bath is of prime importance, particularly if there is a tendency to renal insufficiency. The cold sponge bath in the morning is oftentimes very beneficial in arousing a vigorous action in a sluggish skin. In either case the bath should be followed by a vigorous rubbing with a coarse towel.

Regular and systematic exercise is an important factor at this period for several reasons:

1. It relieves congestion of internal organs by transferring the blood from them to the muscular tissues.

2. It has a depletive effect by causing the skin to perspire more freely and the kidneys to excrete urea.

3. Exercise acts as a safety valve for that redundant energy which manifests itself in nervousness, irritability, sleeplessness, etc.

It will be obvious that the preceding remarks do

not apply to cases marked by extreme debility, for it would be well nigh impossible to carry out any such procedure; but just here we have at our command that most useful adjunct, Massage, and the Swedish movements which, when used systematically and by an expert, will often accomplish wonders.

Nervousness in some form is an almost constant attendant during this period and should be combatted by suitable habits. The exacting demands of society cannot be properly met at this time and should therefore be given up as far as possible.

Sleep at proper times and in sufficient quantity is of the utmost importance. Bad sleepers will as a rule sleep better for having eaten something just previous to going to bed, and for this purpose a cup of beef tea or glass of milk with a slice of bread and butter will usually prove sufficient. In cases of sleeplessness depending upon nervous irritation a warm bath just before retiring is often very serviceable, it is needless to say that the sleeping apartment should be well ventilated.

Travel is a great strengthener of the nervous system by giving occupation to the mind as well as exercise to the muscular system, and so increased vigor to the brain. As has been already stated the nervous system is more or less unhinged at this time, often to such an extent as to severely tax the ingenuity and patience of both medical attendant and friends.

The surroundings should be made as pleasant as possible and the numerous vagaries of many cases treated with such tact and consideration as may seem best adapted to each case.

I need scarcely mention that as a rule marriage at this period of life should be avoided, as the results are often very harmful, tending to increase the danger of flooding and aggravating any existing uterine disease.

I have not said anything about remedies, as each case is law unto itself and will require careful prescribing; but while we are prescribing our drugs let us not overlook these other means of which I have spoken.

Associations.

THE JUDICIARY OF THE AMERICAN INSTITUTE.

By J. P. DAKE, M.D., Nashville, Tenn.
ex-president American Institute of Homeopathy.

It has occurred to me that some one acquainted with the history and purposes of the American Institute of Homeopathy should publish an exposition, in brief, of the provisions in our national organization for dealing with ethical troubles that occur in the profession, especially among its own members, and it having fallen to me to preside over the Senate of Seniors several times of late, and having had a pretty full acquaintance with Institute affairs ever since 1848, I make no apology for presuming to write on the subject.

1. The single purpose of the American Institute of Homeopathy has been to cultivate the art of healing, in its broadest sense, more especially as aided by the Homeopathic principle. It was organized for what is termed *scientific work*, as distinguished from personal and political.

By committees, bureaus and sections, as well as in general sessions, it has aimed to investigate, discuss and make known what should be understood by the healers of the sick, especially in the domain of Homeopathic therapeutics. What the individual practitioner has been unable to do on his own field and in his personal capacity toward research and experimentation he has been enabled to do by association and division of labor with others in an organic capacity.

The Institute, while a national society, has never assumed any control of or responsibility for any other society, or any college, pharmacy or journal. It is simply concerned with its own work and with the capability of its own members. It listens to reports from all other organizations devoted to medical interests, more especially from such as favor the Homeopathic method, and delegates from all such are welcomed in its meetings. And as to one of its own members the only question it can entertain is this: Has his or her conduct been such as to disqualify or render unworthy of continued membership, or to render him or her deserving of censure? To do the scientific work and exert the beneficent influence a society must be composed of good members, and whenever the conduct of one becomes questionable as to his or her standing in it, the case is one for consideration.

2. This brings me to the method of dealing with such cases.

In the early history of the Institute complaint against a member would be brought before that body in open session. I well remember the consumption of hours of time, that should have been devoted to scientific work, by charges of unprofessional conduct brought by one member against another. After much discussion, sometimes very heated, the matter would be judicially determined by a vote, a majority ruling. The hearing of such cases proving wasteful of time and disturbing to the whole society the custom was adopted either to refer complaints to a committee or to ignore them altogether. After awhile a rule was adopted to excuse from payment of dues all members who had held twenty-five consecutive years of membership and to constitute them into a Senate of Seniors, to which should be referred all complaints of one member against another.

Article VIII of the By-Laws was adopted as follows:

"All complaints relating to a violation of the Code of Ethics of the Institute shall be referred to the Senate of Seniors for consideration and adjustment, and its decision shall be final without further action of the Institute."

The view taken was that a body composed of members who had, for a quarter of a century, been supporters and workers in the Institute, and who might be considered wise as well as experienced, and surely devoted to the best interests of the society, would constitute the most competent judicial tribunal for the hearing and settlement of ethical cases. It would take all personal differences and difficulties away from the general and scientific meetings and confine their investigation and all disturbances of feeling arising in connection therewith to a small number of the oldest members.

For a number of years now the senate has handled all such cases, allowing the work of the Institute to go on undisturbed by them, and the feeling

has been that the senators, in view of their relief from payment of dues and of their privileges and honors, could well afford to perform such judicial service.

3. The American Institute, I should say, has regarded its functions as quite different from that of an inquisition for hunting out heresy and punishing heretics, and as not responsible for some lack of learning and judgment and zeal on the part of some of its members. It has never aimed to make all of one measure nor of one mind, but has encouraged independent thought and investigation.

Requiring unanimity of belief in the Homeopathic principle and compliance with the educational requirements common to the country and times, it has allowed a great variety of opinions as to means and measures, theories and practices among its members in the treatment of the sick. Individual freedom has been one of its crowning glories.

When the time comes, if unfortunately it ever does, that its attention is diverted from scientific work to the consideration of the shortcomings and quarrels of its members and the adjustment of college or society, or other difficulties outside, on the floor of its general sessions, its day of usefulness and its glory will be gone.

THE DENVER MEETING.

Dear Dr. Fisher.

Your letter was received a day or so ago, and I think best to answer it at once as I have a good deal of work connected with the A. I. H. meeting to attend to and do not wish to forget it.

The members of the local committee were called together on November 24th, and after a free discussion it was decided to go into permanent organization. The following officers were elected: Chairman, Dr. Eugene F. Storke; Vice chairman, Dr. E. H. King; Secretary, Dr. S. F. Shannon; Treasurer, Dr. W. A. Burr. Since that meeting there have been two meetings held, at the first of which the chairman of the local committe appointed the following chairmen of sub-committees: Finance, Dr. J. M. Walker; Printing, Dr. E. H. King; Lady Visitors, Dr. Genevieve Tucker; Entertainment, Dr. J. W. Anderson; Press Dispatches, Dr. A. Cuvier Jones; Railroads, Dr. N. G. Burnham; Hotels, Dr. W. A. Burr; Excursions, Dr. S. S. Kehr; Hall, Dr. E. J. Clarke; Programme, Dr. J. B. Kinley. The Reception Committee consists of the President of the State Society, the President of the Denver Homeopathic Club, and Dr. Storke, with power to add two others.

At the last meeting of the committee the following resolution was adopted:

Whereas, the coming of the American Institute of Homeopathy to Denver marks an era in the progress of scientific medicine in the Rocky Mountain region, therefore be it

Resolved, That we, the Committee on Local Arrangement, reinforced by the Homeopathic physicians of Colorado, do hereby pledge ourselves to do our utmost to entertain the Institute in a manner worthy of the notable occasion.

We have a large number of physicians on whom to draw to help to show the Institute that Denver, although situated in the "wild and wooly West," can do herself proud when the opportunity is afforded to her. I believe there are about 150 Homeopaths in Colorado and they are united for the Institute.

Other matters referred to in your letter I shall bring before the notice of the committee at their next meeting. Fraternally yours,

Samuel F. Shannon, M.D.

Correspondence.

FOREIGN CORRESPONDENCE.

LETTER FROM RUSSIA.

My Dear Dr. Fisher:

I have not been able to send you till now the promised article about the cholera therapeutics of the old school. After my return from America I was seized with an incapacity for work, which is quite contrary to my usual habits. I attribute this fit of laziness to a nervous reaction after all the exciting impressions, new faces and general strain upon my mind during my short but most interesting trip to America. It was only in the month of October that I felt equal to begin work again, and since then I have been busily engaged with the enclosed article, which my wife has just put into English. I have given it the title of "Excursions," because I have in view writing a series of similar articles of which this one, "Cholera Therapeutics," is the first. The second will be about "Cholera Statistics," and third about the "Therapeutics of Tuberculosis." As soon as I hear from you whether you approve of the style and manner in which the cholera therapeutics of the old school are treated, I will set to work with the articles to follow. The materials for the therapeutics of tuberculosis, are, perhaps even richer than those for cholera. In any case I do not promise to write these papers in a short space of time, as I have just now in hand a report of the World's Congress for the German and Russian papers, and after that will follow my contribution to the session of the American Institute of Homeopathy to be held in Denver. The subject is not easy: "How Materia Medica Should be Taught and Studied?" Although some of the preparatory work is already done, it is a subject which requires a good deal of thought and exertion. You have therefore to be patient and wait a little for further contributions, which, if acceptable, will be at your service in the future.

I enclose a short notice, which, I think, should be inserted in the Century. The subject is serious enough to be taken up, and it is really necessary to put a stop to the scandalous rumors which are so unjustly spread about the American medical faculty.

Both my wife and I remember with true pleasure our visit to the World's Congress and all the kindness and friendliness with which we were received; it is a pleasant thing to look back to, and, God willing, we are looking forward to another journey to the New World some day, which would give us the pleasure of seeing again the kind friends we met there. C. Bojanus, Sr., M.D.

Government of Samara, Nov. 23, 1893.

His thousands of friends in the United States will be glad to read the foregoing letter from our venerable and patriarchal friend, Dr. Bojanus, whose attendance upon the World's Congress of Homeopathic Physicians and Surgeons, in Chi-

cago, last summer, was so very greatly enjoyed, and will be glad also to follow him in his review of the cholera treatments of the old school. The first of the series is given place in this issue of this journal. Others will follow in succeeding numbers, the great length of the article making it necessary to divide it into sections, the whole to be presented as a serial.—ED.

LETTER FROM AUSTRALIA.

MELBOURNE, Australia, Nov. 22, 1893.

EDITOR MEDICAL CENTURY:

My conscience has been pricking me in that I have done nothing to serve the MEDICAL CENTURY so far, so I am trying to make amends before the new year comes. I forward you an article on "The Radical Cure of Hernia," by one of the surgeons to our Homeopathic Hospital, which I hope will prove interesting and instructive to your readers. For myself I will surely try to send something along before another month passes by.

You will be glad to know that although all the colonies have been passing through a severe financial strain Homeopathy is doing well. The work is certainly spreading and our clientele is of the best. We have maintained our ground well in the Hospital, which by its work has forced the authorities to recognize us as one of the big public charities. This they would never have done unless obliged to do so by results. Kindly send me a copy of your journal containing the article on Hernia which I can present to the writer.

Wishing yourself and the CENTURY every possible success, and hoping to be of more use in the future, believe me to be, fraternally yours,

(Signed) WILLIAM R. RAY, M.D.

The article on the Radical Cure of Hernia is from the pen of W. K. Bonton, M.D., Hon. Surgeon to the Melbourne Homeopathic Hospital, and appears in the current issue of the MEDICAL CENTURY. It will be appreciated by our readers, who will be glad to have further contributions from his pen and that of Dr. Ray.—ED.

LETTER FROM INDIA.

CALCUTTA, India, Nov. 21, 1893.

DEAR DR. FISHER:

I could not as promised contribute to your esteemed journal, nor could I see you personally at Chicago. "Man proposes, God disposes." I was taken ill and have been ailing all along. I am better now and able to resume my practice. Next year I shall be able to contribute to your much esteemed CENTURY regularly. I am happy to state that the CENTURY has become an ideal Homeopathic journal. It is needless to say that in so short a time it has taken front rank in medical journalism. In fact it is one of the best edited journals in the United States.

I am sorry to find that you and other American editors confound me with one D. N. Bannerjee, who is styled "doctor" and mentioned as the well-known Homeopathic physician of India. In point of fact he is only an amateur; he has never received any medical education and has been humbugging and deceiving American, German, Swedish and English editors and physicians. He has been regularly receiving free copies of books and medical journals for his so-called free library, which does not exist at all. I shall thank you to mention this in your widely circulated journal to warn our American colleagues. You can mention this on my authority. Many of our American colleagues write me on this subject. They confound me with this pretender, D. N. Bannerjee.

I beg to enclose report of a case which recently came under my observation for publication in the MEDICAL CENTURY. Yours fraternally,

(Signed) B. N. BANNERJEE, M.D.

34½ Beadon street.

The complaint about the conduct and standing of Dr. D. N. Bannerjee is not altogether new to the editor of the CENTURY, but not having before had reliable and direct information covering the case it has been allowed to pass unnoticed. The fact that our correspondent openly declares himself on the subject serves to show that he comprehends the situation, and it is hoped the profession will not be further imposed upon in these premises.—ED.

LETTER FROM LONDON—DR. BROWN'S DEFENSE.

29 Seymour street, Portman Square,
London, Dec. 6, 1893.

DEAR DR. FISHER:

I am happy to renew our acquaintance in replying to your letter, as I have a lively recollection of the pleasure of your company at dinner at my house some years since.

I would not have made the statement I did at the Congress unless it had been founded on what I considered correct information. My information came from Dr. Heath himself, when he called on me after his return from the United States. As you will see by the December number of the *Review*, which you have no doubt received by this time, we have published a letter from him signed "M. D., U. S. A.," and as he states that I have incorrectly stated the facts and that I have misunderstood him I have withdrawn the statement, as any gentleman would do when told that his facts are incorrect, and have expressed regret "that I should have been found capable of so misunderstanding what seemed to me plain language."

But I have just received a letter from Dr. James, of the Hahnemann Medical College, Philadelphia, a copy of which, as it is not marked private, I enclose. (This letter is the same as the one published from Dr. James in the CENTURY for January 1.—ED.) There you will see that he practically corroborates my statement that Dr. Heath went to Philadelphia with certificates of having attended one session at a London medical school, and the first course every student takes is anatomy. His second session was at Philadelphia and his third is counted as being represented by his being a registered chemist. This latter has nothing to do with any medical curriculum at any medical school in this country, but is granted to all chemists who were in business before the passage of the Chemists' Registration Bill in 1868, and every chemist must have such register. If the Philadelphia school chooses to accept this as equal to a session of a medical curriculum that is their business. But it really amounts to Dr. Heath's having had one session in London and one in Philadelphia. His degree, Dr. James states, is therefore fully correct and legal in America, and of course I accept this statement as correct.

But it is one thing to grant a degree in America on certain terms for those who are to practice in America and quite another thing to grant one to an alien who is to return to his own country,

and expect him to take corresponding position here. In Great Britain four complete years of a medical curriculum at some recognized medical school are required to obtain any diploma whatever, besides a corresponding amount of hospital work and attendance on clinical lectures to insure practical knowledge. Private study does not count in place of this. Now, if a man, instead of going through the requisite four years curriculum in England and taking his diploma of some kind, goes to the united States and gets his degree of "M.D.," after having had only two sessions of medical lectures, he cannot expect that his degree will be recognized here as entitling him to mix as a professional equal with those who have had four years curriculum and hospital practice corresponding.

Holding these views you will see we cast no slur on any of the American colleges for doing for their graduates as they think best. Many of us have American degrees, given *honoris causa*, and those who have them are proud of the honor; but you must see the point of difference I have explained. Dr. James, in his letter, as you will see, states that Dr. Heath urged the next to impossibility of his getting his diploma in England on account of his being a Homeopath. But Dr. H. knows, or ought to know, that to refuse a diploma on this account is illegal by the Medical Act, a special clause having been inserted in that act to prevent such an occurrence; and any practical difficulty on this point is due, I may say, to Dr. Heath's imagination. Since the passage of the Medical Act no such case has occurred.

The aim of the American colleges is now, I understand, to make the curriculum at least four years and to raise the standard of medical training accordingly; and any refusal on our part to recognize the degree obtained on the terms stated by Dr. James ought to give no offense to our esteemed American colleagues, but rather ought to be looked upon as a support to the aims in teaching of the present day.

As to the other case mentioned, viz, Cleveland, you can ascertain the facts easily. The lady's name I reserve. I know her well. She told me of her going to Cleveland and I gave her a personal introduction to the head of the college as a lady whom I knew to be of high character. She had been for some years a Homeopathic chemist. But I know for a fact that the only training she had in medicine was attendance on Dr. Pope's lectures in Materia Medica and mine in Practice of Medicine at the London School of Homeopathy. These she attended regularly and she came to see the hospital practice. She was six months at Cleveland and came back with her "M.D." This was somewhere about two years ago.

A third case is Dr. ———. He had no courses of lectures except those I have stated the lady had, at the London School of Homeopathy, and never left England at all. But after long negotiation with the Homeopathic college in——— his diploma of "M.D." was sent to him after paying the required fee. This was also somewhere about two years ago. I know this gentleman very well. He told me of all the negotiations as they went on, and finally showed me in triumph his diploma.

Degrees such as the two last, at any rate, you will agree with me, cannot be recognized in this country

Believe me to be, yours very truly,

(Signed) D. Dyce Brown.

Note.—The name of the last Homeopathic college complained of by Dr. Brown is purposely omitted from his letter by the Century, since no mention of it has been made in print nor has the name of the English diploma-purchaser been given whereby the school might be run down. It will be seen by Dr. Brown's letter that he clearly stands by his attack on the Homeopathic colleges of this country. The views of the editor of this journal on this question will be found in their proper place in the editorial department.—Ed. Medical Century.

DOMESTIC CORRESPONDENCE.

THE MEDICAL CENTURY—OUR COLLEGES.

Ed. Medical Century:

It is said a doctor's bill is most difficult to collect, the printer's next. You no doubt can vouch for the truth of this latter.

When I say that my collector has returned with accounts aggregating from $500 to $800 ordinarily considered O.K. without receiving a penny, you can appreciate the fact that you live in Chicago, where all the money of the country was poured in last summer. You can also better understand why the dilatory medical fraternity do not pay for the Medical Century more promptly.

Perhaps others are not so "hard up" as the writer.

No one appreciates the fact that the Medical Century is one of the best Homeopathic journals published better than myself. I admire its general make up; the character of its contributions; but more especially its firm and unmistakable position for justice and right in all that pertains to the Homeapathic law of cure. As every Homeopathic physician should be, I am very much interested in the outcome of the charges by Dr. Brown against our colleges. It looks just as though it came from a "Britisher," but should it result in causing our colleges to exercise greater care in maintaining the standard for matriculation and likewise the dignity of the Homeopathic profession the occurrence may not be inopportune.

There is no doubt that the unnecessary number of Homeopathic colleges results in lowering the standard of matriculation as well as that for graduation. The standing of a medical college is usually reckoned by the number of its matriculants, and the latter in turn by the size of previous graduating classes. This furnishes an incentive which lacks proper tone.

With perhaps a few exceptions the requirements for matriculation can be furnished by almost any plowboy or pupil from our grammar schools. Is this right? Can the Homeopathic fraternity afford to be charged, as Dr. Browning says, with being "sadly deficient in literary as well as scientific qualificatlons?"

Students enter our colleges after attending lectures in old school colleges one or two terms and are given credit for full time and pass no matriculate examination whatever, while students from Homeopathic colleges are given no credits in the old school institutions. We have been on the defensive long enough. Is it not time we take on an aggressive spirit?

If we must admit the fact that anybody can be a doctor, then, as Prof. Gilchrist has said, let us have

medical degrees graded. Reduce materially the number or our colleges. Give us better teaching in those remaining. Restrict matriculation in medicine to graduates in science and arts if need be, instead of admitting every one with a fourth rate teacher's certificate. Apply the rule to the "regulars" which they apply to us and we will have better Homeopathic physicians, less polypharmacy and empiricism in our school and our state board of examiners will be a useless appendage.

We cannot afford to remain indifferent to the appeals of our patronage. D. E. Bottorf, M.D.

Mansfield, Ohio.

International.

NOTES FROM OTHER LANDS.

The International Congress to be held in Rome the coming spring will convene on Easter Monday, March 29th. It is not expected that the attendance will be as large as usual.

Prof. Virchow has just celebrated his fiftieth anniversary as a physician. Numerous ovations were tendered him but all were refused except the presentation of a bouquet by the Medical Society of Berlin.

The German Congress of International Medicine which was to have been held in Munich next April has been postponed until 1895, so that the meeting will not clash with the International Congress to be held March 29 to April 5th, this year.

The British Homeopathic Society held a very successful session on November 2d at the college of Organists at Bloomsbury, London. Several new members were elected and a number of interesting papers were read and discussed.

In Antwerp Homeopathy is spreading among the poorer class as shown by the increased attendance at the Homeopathic dispensary recently established there. Consultations in January were 283; in June, 413. Visits on sick people at their residences: January, 66; May, 117. It is a rare thing that any one returns to Allopathy after having been treated at this dispensary.

Cholera in Russia.—From January to September of the year just closed, there were in the Russian Empire 62,107 cases of cholera, 24,284 of which proved fatal. In 1892 there were 433,643 cases from May to September with 215,137 deaths. The number of cases during 1893 amounts to about one-seventh of the number for 1892, while the death rate stands as one-ninth of the number dying during 1892.

Scarlet Fever in London.—There were 16,624 admissions of scarlet fever and small pox patients to the London Fever Hospitals last year, or double the number for any year before. Of the admissions 13,093 were for scarlet fever, 420 for enteric fever, 2,009 for diphtheria and 348 for small pox. The hospitals did not receive quite half of the cases of scarlet fever of which they had notice, these amounting to 27,095 in number. The death rate of scarlet fever at home was but 2.3, while at the hospitals it ran up to 6.4. The mortality at the hospital with diphtheria was 29.1, against 22.5 at the homes of the patients. The figures would seem to argue against forcible removal from home to hospitals of patients suffering from scarlet fever or diphtheria.

The 400th Anniversary of the birth of Theophratus Paracelsus von Hohenheim, the father of German therapeutics and natural science, was celebrated in his native village, Maria-einsiedeln, in Switzerland, on November 26th. There is some uncertainty about the date, however, for in some quarters December 17th is given as the philosopher's birthday. But the Novemberists hold the balance of evidence. Paracelsus was body physician to Archbishop Ernest of Salzburg, Austria, and died it is supposed by a murderer's hand in the residential state of that prelate on September 23d, 1531. His monument may be seen in the church of St. Sebantian in that town. He is said to have been a dwarf, barely four feet high, weak voiced and child faced.

Homeopathy in Berlin.—In a recent issue of the *Monthly Homeopathic Review* Dr. George Burford, of the London Homeopathic Hospital, recites some interesting experiences connected with a recent visit to Berlin, in which he says that he found a greater proportion of Homeopaths in Berlin than in London, a well conducted and largely attended Homeopathic Poliklinik, a substantial sum already in hand for a building of the Homeopathic hospital, a Homeopathic society with a well edited quarterly, no deficit in younger men desirous of learning Homeopathy and the existence of a general sentiment of progress. Berlin has about twenty fully qualified Homeopaths in active and successful practice. The sum in hand for the hospital erection amounts now to about £15,000. It is thought that this sum is quite sufficient now to make a good start, but as German hospitals are sanctioned and ordered by the state it is thought that a much larger sum had better be raised before active work in hospital construction is begun.

Necrological.

DRS. HOBART AND KNOLL.—RESOLUTIONS OF RESPECT.

At a meeting of the Rock River Institute of Homeopathy, at Clinton, Iowa, January 4, 1894, C. B. Kinyon, M.D., in the chair, the following memorial resolutions were adopted:

Whereas, It is with deep regret that we have learned of the death of Drs. H. M. Hobart and W. F. Knoll, therefore be it

Resolved, That in their decease this Institute recognizes a great blow to our profession, both from their ability as practitioners and position as teachers of the principles and practices of Homeopathy and progressive medicine.

Resolved, That as being known to most of us personally we feel more keenly their loss, and would express to their families our sincere sympathy in their bereavement.

Resolved, That these resolutions be spread upon the minutes of the Institute, copies sent to the families and to the Medical Century.

J. C. Burbank, M.D.,
A. W. Blunt, M.D.,
Committee.

Clinton, Ia.

Medical Century

An International Journal of Homeopathic Medicine and Surgery.

C. E. FISHER, M.D., - Editor.

ASSOCIATE EDITOR:

W. A. DEWEY, M.D., New York.

Chicago, February 1, 1894.

HOW TO STUDY MATERIA MEDICA.

Under the competent chairmanship of Dr. Frank Kraft the section in materia medica will consider the subject at the Denver meeting of the American Institute of how best to study drug pathogenesy. The topic is a most excellent one. Materia medica is the backbone of Homeopathy, as, in fact, of all medical practice. But the Homeopathic materia medica has been so much like a dictionary of symptoms that it has ever been a difficult study, and to most of us the most uninviting and unenjoyable work we have had to do. "Dry as a bone," hardly expresses it. And yet, to be a good Homeopathic practitioner it is absolutely essential that one should know his materia medica and know it well.

If the section shall in any way simplify and make more attractive study in this department of our science it will have earned the gratitude of the whole profession. It is not expected that Dr. Kraft and co-laborers will be able to do away with the dictionary plan of symptomatology, for this is an essential element in its composition. Symptomatic prescribing is the best and only accurate method of fitting a drug to a case. It cannot be done away with successfully. But if they can simplify or systematize the general study of pathogenesy so that it will be a pleasure instead of a bore they will have forever won the hearts of every doctor in our school. We shall expect something practical. We know we will not be disappointed. But just what the line of work shall be we know not, nor do we know just what the section has in store for us. A word from Dr. Kraft as to the plan of operations contemplated would help us get ready for the work of developing some form of materia medica study that shall be at the same time practical, useful and pleasurable. Let us hope that the Denver meeting will be a memorable one from the materia medicist's viewpoint.

THE LION AND THE LAMB.

The lion and the lamb have been munching the meadows together quite often of late, and 'tis a healthy sign. A few years ago the lion did all the munching to the manifest discomfort of his fleecy friend. Now, not so. The lamb munches a little bit occasionally, only occasionally, and only a little bit, 'tis true, but he munches, nevertheless, and for this he is thankful, duly thankful. For 'tis better to be allowed to munch a little bit than not to be allowed to munch at all.

In Ohio there has been a love feast recently. About fifty doctors of all schools of practice met at Columbus in December to consider the legislative situation, with an old school man in the chair and with our Dr. H. E. Beebe by his side as vice-chairman. Several legislative bills were prepared and submitted to a committee of five, of which one was of our persuasion. A committee of seven was appointed to wait on Governor McKinley to ask him to embody in his message a request for such legislation as is desired, and of this committee two were of our faith. A bill was finally adopted as the sense of the meeting in which the concession is made that no school shall have a majority of the board to be created by law, if indeed it be so created. In this law authority is to be given the board to accept diplomas from reputable colleges and to reject those from colleges not up to a given standard. This is an excellent provision and should become generally adopted. There is no good sense in forcing physicians who are graduates of reputable colleges to pass examination in each or every state in the union, while the provision to recognize colleges which are thorough and to refuse to recognize those that are not will soon bring all the colleges up to the standard, and thus the whole profession will be elevated.

In Louisiana, too, the lion and the lamb have been cajoling with each other. Twice in recent years has the old school undertaken to enact medical laws to suit itself, and twice has it suffered ignominious defeat. So this time it has shown good judgment by taking the Homeopaths of that state into conference. A meeting was held in New Orleans in December at which the views of both sides were interchanged and the position of the Homeopaths was clearly outlined by Dr. C. J. Lopez, president of the Hahnemann Association of Louisiana, to be in positive opposition to all medical bills which ignored our side. He expressed a willingness on the part of his society to meet the old school fairly in the matter, and it was agreed that amendments to suit the views of the Homeopathists of Louisiana should be prepared and submitted at a future meeting.

In Kentucky, too, the legislative contest which has been going on for some time past has brought the old school and the Homeopathic members of the State Board of Health and legislative com-

mittee close together and the interests of our school are fully and we believe fairly considered.

As a matter of fact it has been demonstrated in a good many states that the Homeopaths and Eclectics are strong enough and sharp enough to defeat any and all legislation that is not fair to all alike, and the result is that the old school lion is now quite willing to consult the Homeopathic lamb in matters of this nature.

What is the moral? Simply that all that is necessary in any state where legislation is being attempted is for us to stand firm as the rock of Gibralter against forms of legislation objectionable to us. We do not have to accept anything brought forward, whether it be the single examining board or boards for each school. Homeopathy is to-day master of the situation, because of the honesty and independence and fair-mindedness of the American people, and the old school will be compelled to give us liberal legislation, non-restrictive legislation, strictly American legislation, if we but stand firm against encroachments upon our rights and the reasonable liberties of the people, as has been done in Louisiana, Georgia, Texas, Ohio, Illinois and other states in recent years. We have no sympathy with that spirit that compromises on a thing we do not want and should not have foisted upon us simply because the old school majority are pressing it. Stand firm for the right and for independence and liberty in the matter of legislation and the lion will everywhere invite the lamb to dinner, as sure as gun's iron.

THE NORTHAMPTON INCIDENT.

In the issue of this journal of January 1st were presented letters bearing on the Northampton incident from Dr. T. G. Vawdrey, Plymouth, England, and also from Dr. John E. James, registrar of Hahnemann College, Philadelphia, and Dr. Byron E. Viets, registrar of Cleveland Medical College, and in this number is given a lengthy explanation from the pen of Dr. D. Dyce Brown, editor of the *Monthly Homeopathic Review* and honorable secretary of the British Congress, from all of which the profession will be able to draw conclusions far from pleasant.

From Dr. Brown's letter it will be seen that the question of the registrability of the physician denied admission to the Congress is not the real issue. He could have been excluded as a non-registered practitioner under the British Act and no complaint could have been made. But Dr. Brown went further, and in explaining his reasons for not having extended an invitation to Dr. Heath directly attacked the integrity of at least two of the colleges of this country. And it will be seen by his letter that he defends himself in this, and goes further and tells of another American Homeopathic College that has been guilty of wrong doing, according to his story. And thus the issue is squarely forced upon us and the characters of our teaching institutions are directly attacked in the house of our British Homeopathic friends.

Just here a paragraph from the letter of Dr. Vawdrey is quite apropos:

"It would be the quintesence of affectation, if not a piece of sublime impudence, for any British Homeopathic physician to ignore the services rendered Homeopathy by our American colleagues. Moreover, the American Homeopathic colleges have ever been in advance in insisting upon an adequate course of study as a consideration for graduation. Dr. Dyce Brown must be well aware of these facts and it is, therefore, difficult to suppose him capable of offering a gratuitous affront to an American college, of which we know nothing but what is to its credit."

Exactly! It is difficult to suppose any one capable of such an act, and yet in plain language Dr. Brown offers this gratuitous affront and directly charges three of the foremost Homeopathic colleges of the world with carelessness in the issuance of their degrees.

To our mind there is a valid explanation for this matter. It has been supposed in America that the London Homeopathic Hospital School, manned by Dr. Dyce Brown, the complainant in this case, and a few of his colleagues, is a regularly conducted medical college. Certain Britishers have come to this country possessed of the qualifications of pharmacists, whose degrees are recognized on this side of the water as equivalent to one course of lectures, and with a certificate of attendance upon a course of lectures in the London Homeopathic school. This certificate has been supported by personal letters from such men as Hughes, Dudgeon, Pope, and even D. Dyce Brown himself in one of the cases in which he now enters complaint, and our colleges have been led to suppose they were being dealt with honorably and fairly; and when they have found the applicants qualified in their studies they have granted the degree of their respective schools on the strength of those examinations and the parchments brought from London. Whereas, as a matter of fact, the London School is simply a place wherein is delivered a series of practitioners' lectures upon various topics connected with the practice of Homeopathic medicine, and if wrong has been done in giving recognition to its certificates Dr. Brown and colleagues who have issued these certificates and who have sent these men and women over here armed with personal testimonials and requests for courtesies are a party to the crime, if indeed, crime there be.

This incident should teach us a lesson. The Homeopathy of this country has no favors to ask of the Homeopathy of Great Britain if it is to follow in the line marked out at Northampton.

Among the members of that congress were several possessing the honorary degrees of the very colleges attacked, and several members had been the recipients, some of them quite recently, of extensive courtesies at the hands of their American colleagues; yet not one of them had the temerity to defend their American *alma maters* nor to rise in defense of the Homeopathic colleges of the United States. And while it should ever be a pleasure for us to receive most courteously all colleagues from other lands, and to extend every possible courtesy and help to students from foreign countries who come to America to learn Homeopathy, we should hereafter be right chary in accepting certificates of character and attendance upon the London school from Dr. Brown and those of his colleagues of the British Congress who failed to defend our colleges from his attack upon them. Especially should our colleges look most carefully into the credentials of British students, and especially should they carefully analyze letters brought from London.

It is to be regretted that Dr. Brown allowed his perhaps justifiable opposition against British practitioners holding American degrees to drag in this most unwarranted attack upon our colleges. It is to be regretted also that with other members of the Congress he wrote letters of commendation and requests for courtesies toward those whose standing in the profession he now calls into question; and it is to be regretted further that our colleges gave the slightest heed to the certificates borne from across the water, especially to those certifying attendance upon schools not regularly conducted as medical colleges; or, in other words, it is to be regretted that our colleges have been deceived by Dr. Brown and others of our British friends who sent these students to us, and who would now heap calumny and shame upon us for giving heed to their own parchments. Let us not be caught in such a dilemna again.

IN OLD KENTUCKY.

The profession of Kentucky, old school and Homeopathic, has been very much exercised recently over their new medical law. It provides for the registration of diplomas from recognized medical colleges, requiring the applicant for license to present himself and parchment to a local referee appointed by the State Board of Health, who makes report according to his prejudices or the facts of the case, as it may be, and upon said referee's favorable report and the presentation of a lawful diploma the secretary issues a certificate of registration which entitles the holder to the right to practice. The objection to the law seems to hinge on two points. First, it was not asked for by the profession, who were in ignorance of its existence until it had become a law; and, secondly, upon the fact that in several communities the profession or portions thereof have taken exception to the idea of having to be given a certificate of character, as it were, by one of their fellows, perhaps no better, if not worse, than themselves. The secretary of the State Board seems to have been over-officious in some instances, too, and has thus made himself unpopular in some districts, especially in his own home. And for these reasons there has been much dissatisfaction expressed with the law.

As the outgrowth of this feeling the Homeopathic State Society was convened in special session in Louisville on the 17th of last month to consider what action, if any, that body should take with reference to the matter. The attendance was thoroughly representative and the subject received full consideration, with the result that it was unanimously decided that as it was working no harm to the substantial interests of Homeopathy it would not be wise to take any action whatever in regard to the law, it being looked upon as fair and reasonably just and in every sense more satisfactory than an examining board law, which would be the next move of the old school if this law were disturbed.

It was our pleasure to attend this meeting, and it is a pleasure to record that the Homeopaths of Kentucky are fully alive to all their interests, that they are an intelligent and earnest profession, that they are not to be hoodwinked by the sophistries of the friends of the examining board plan of control, and that they are in every way a match for the old school profession in acumen, earnestness and ability to defend their individual and school rights before the law.

It will not do to say that the Kentucky law is in all respects satisfactory. It smacks too much of paternalism, of one-man control, of legal proscription of certain sacred rights of the people. And in some respects it is unquestionably unconstitutional. It is not unlikely that under the contest being waged by certain advertising specialists some of its clauses may be wiped out, and if this is done the Homeopaths will not object. But in the main it is a model registration law, fair to all reputable schools alike, calculated to materially restrict the operations of the traveling mountebank and far less objectionable than the examining board plan of control, while at the same time it is certainly more effective than the latter.

At present Homeopathy has one representative on the State Board of Health, Dr. J. A. Lucy, of Frankfort. The meeting of last month placed Dr. Malcolm Dills, of Carlisle, in nomination to the governor for Homeopathy's second repre-

sentative on the board, and if he is appointed our interests may be accounted safe. For these gentlemen are among the staunchest guardsmen of Kentucky and will ever look to Homeopathy's interests before the law.

From all that was to be learned at this special meeting of the Homeopathic State Society of Kentucky reputable practitioners of all schools are certain of fair treatment, and no one need hesitate about immigrating to that state if a graduate of a reputable college, provided his reputation as a man or woman as a practitioner of medicine is unsullied. The law is directed against traveling medical men, non-graduates and men and women of bad repute. In its main features it is one of the fairest and most practical of all the medical laws we know of.

AND IS THIS AMERICA?

"'Tis a foul bird that soils its own nest." And the worst case of nest-soiling known of for a long time is to be found in the utterances of the *New England Medical Gazette*, in an editorial appearing in its January number, in connection with the discussion of the Northampton incident. After quoting largely from advance sheets of an editorial from the *Monthly Homeopathic Review*, London dealing with the action of the British Congress in relation to American Homeopathic diplomas, the *Gazette* speaks as follows:

"By the happening above chronicled we learn that a far graver, a far more humiliating charge can be to-day made, and is to-day made, *and with solid and most discreditable fact as its basis* (italics ours), namely that American Homeopathic medical colleges grant degrees of such little worth, degrees which are so little a matter of qualification and earning, *and so much a matter of cheap, outright purchase* (italics ours again), that these degrees do not qualify their possessors for honorable association in professional societies with their British fellow-workers.

"In authorative and representative assemblies, such as the American Institute, such a happening should receive full investigation; and once proved, censure, whose voice has no note of compromise, should be passed on any Homeopathic college, which, *for the sake of swelling its treasury* (italics ours once more), can so far betray its trust to the interest and honor of Homeopathy, and the safety and welfare of the public at large, as to confer diplomas under conditions such as those the happening of which is our text. *While thus grossly purchasable by incompetency* (italics ours again), Homeopathy can ask but with faltering voice for the public rights which should belong to educated and honorable practitioners. A college guilty, *as the college in question was guilty* (ibid), should, whatever its standing, on no plea escape exposure and rebuke. Our most dangerous foes are in our own household."

As exclaimed in our editorial on the Northampton Incident, "Exactly!" Our most dangerous foes are in our own household, and the *New England Medical Gazette* is making itself one of them with indecent haste when it voices such utterances as the above on the ex parte testimony of one who, while holding an honorary diploma from an American college, would knife us to the heart in open convention without endeavoring to satisfy himself about the real merits and facts of the case in point before-hand. Bad enough is it for American Homeopathic institutions to be thus piratically attacked in the house of British Homeopathy, but it is absolutely wicked for the mother of Homeopathic colleges to be thus indicted, found guilty and condemned in the house of one of our own journals without the least show for its life or for explanation.

The *Gazette* assumes the statement of Dr. Brown before the British congress to be absolutely and undeniably true. It assumes a great deal more than it or any other journal has a right to assume when it talks about "outright purchase" and the betrayal of trusts "for the sake of swelling its treasury," while it completely oversteps the bounds of propriety, aye, of decency, even, in talking about the diploma of any college connected with Homeopathy being "thus grossly purchasable by incompetency." For shame! Does not the *New England Medical Gazette* know that old Hahnemann has enjoyed an unsullied reputation for lo! these forty years? Does it not know that it is the college of Hering, of Lippe, of Raue, of Helmuth, of Dake, of Farrington, of Cowperthwiate, of McClelland, of Guernsey and of thousands of the best men in Homeopathy's ranks the world over? Does it not know that thus to attack and indict and condemn without a hearing is censurable in the highest degree? What in the name of heaven could the *Gazette* have been thinking about when it voiced that tirade against the mother of Homeopathic colleges, against one of the purest, highest and best of all our magnificent teaching institutions? Is it so "English, don't you know," that it must needs befoul the whole Homeopathic nest in thus besmearing the character of the leader of all our colleges? Oh, shame, where is thy blush! We might have expected such a diatribe from the Philadelphia *Medical News*. We might even have expected it in the light of recent occurrences from the *Monthly Homeopathic Review*. But to have expected it from an American Homeopathic journal whose proud office it should be to sacredly guard our institutions against the attacks of foes from without and foes from within, never!

If the American Institute of Homeopathy is to have this case before it for review, and it is to be hoped for the sake of exposing the duplicity and deception of some of our British Homeopathic friends it will give it thorough investigation, it

should also take into consideration the scandalous utterances of the *New England Medical Gazette*. For nothing has happened in recent years more deserving of censure than this unfortunate and altogether inexcusable attempt to slander and disgrace one of the leading Homeopathic medical colleges of the world. Old Hahnemann sell a diploma? Old Hahnemann offer a premium on incompetency? Old Hahnemann illegitimately swell its treasury? Perish the thought! The *Gazette* will pardon this journal if it dismisses this subject for the present with the remark that its vocabulary is deficient in language that would be permissable in a journal circulating among cultivated people sufficiently forcible to properly express itself in this matter.

Editor's Table.

Dr. George A. Morrison, Winnetka, Ill., died December 30, of typhoid fever.

Dr. S. Mills Fowler, formerly of Texas but more recently of Chicago, has located at Winnetka.

Dr. E. Lippincott, Memphis, has recently moved into new offices corner of Madison and Second streets.

Drs. E. E. Vaughan and M. H. Barker have recently taken offices in the Marshall Field building, Chicago.

The death of Dr. O. E. Stearns, Freeport, Ill., at which point the late Dr. Knoll was buried, occurred last month.

Dr. Julia F. Haywood, Rochester, N. Y., has recently been very ill with pneumonia. She has, happily, fully recovered.

The next annual meeting of the New York Homeopathic Medical Society will be held in Albany on the 13th of February.

Grant Selfridge, M.D., San Francisco, a Homeopathic son of a Homeopathic father, has been re-appointed oculist to the Southern Pacific Railroad.

The Czar of Russia contributed 500 roubles to the new Homeopathic hospital now building in St. Petersburg. This according to the St. Petersburg *Gazette*.

The four medical colleges of Louisville, Kentucky, had a total attendance of 1,450 students last year, or more than attended all the colleges in London.

Dr. Sheldon Leavitt has recently had a successful symphisiotomy, safely delivering a full term child in the case of a mother who had lost two babies in their birth.

Dr. F. H. Lehman, recently of Rochester, New York, has succeeded to the practice of Dr. F. W. Moreley, Sandusky, Ohio, the latter having removed to New York city.

Dr. L. J. Worthen, Paola, Kansas, has been spending a few weeks in Chicago in post-graduate review. From this city he goes to New York for a short stay at the hospitals.

Dr. O. G. Tremaine, late of Ida Grove, Iowa, has moved to Chicago. His local habitation is at 145 Oakwood Boulevard. The doctor will be a welcome addition to the Homeopathic corps of this city.

Dr. W. D. Foster, Kansas City, editor of one of the brightest little local journals of our school, the *Medical Arena*, has been appointed surgeon-in-chief for the Kansas City, Osceola and Southern Railroad.

The Homeopathic Hospital at Leipzig, Hahnemann's home, recently received a donation of 5,000 marks from a patron who attributed his unusually long life to the fact that he had never used any but Homeopathic medicines.

Dr. James E. Lilienthal, son of the late lamented Samuel Lilienthal, has been appointed professor of pedology in the Hahnemann Hospital College of San Francisco. A worthy son of a worthy sire; in every way a good appointment.

"A system of Legal Medicine" for medical and legal practitioners, by Allen McLane Hamilton, M. D., of New York, and Lawrence Godkin, Esq., of the New York bar, is in process of completion, to be issued by E. B. Treat, No. 5 Cooper Union, New York.

Prof. J. R. Kippax will shortly give the CENTURY an illustrated article on Molluscum Fibrosum, Psoriasis, and Exfoliative Dermatitis. The cases forming the subject of the article are rare and exceedingly typical. They will be much enjoyed by our readers.

Dr. Fisher and the MEDICAL CENTURY are now cosily domiciled in Suite 747–749 Marshall Field building. Dr. Fisher observes office hours from 3 to 5 P. M. on Monday, Wednesday and Friday only. The business department of the CENTURY observes hours from 9 to 4 daily.

Dr. Otto Fulgraff, one of the oldest and most respected Homeopathic physicians of New York, died on November 14, at the age of 74 years. He was the founder of the Broad street dispensary, which treated over a million of cases during the nineteen years of its existence.

If any one can tell just what the legislative policy of the *Southern Journal of Homeopathy* is, after wading through the volumes on this subject that have appeared in recent issues of that journal, he will please apply at this office and receive reward. Its editor is evidently in a good deal of Paine on the subject just now.

The new board of trustees of Hahnemann Hospital College, San Francisco, is composed as follows: Messrs. Galpin and Horace Davis and Drs. Currier, Eckel, Albertson, Palmer, Martin, Peterson, Boericke, Ward and Lilienthal. A truly energetic and loyal board. Look for something in the way of successful hospital work during their reign.

The next annual meeting of the Illinois Homeopthic Medical Association will be held at Quincy under the chaperonage of vice-president Whipple and colleagues, on the 15th, 16th and 17th of May. Dr. A. K. Crawford is president and Dr. W. A. Dunn is secretary. Under their competent management an excellent meeting is sure to result.

Dr. N. Senn, Chicago's distinguished surgeon, has recently made a donation of his elegant surgical library, worth about $50,000, to the Newberry Library under the condition that it shall be kept together as the Senn collection. It contains among other collections the library of Prof. Wm. Baum, professor of surgery in the University of Gœttingen.

Hering Medical College, Chicago, has recently opened a neat sanitarium hospital for the benefit of the college and its interests, on Indiana Avenue, where medical and surgical cases to the number of twenty-five to thirty can be cared for at one time. The new college and hospital building will be ready the coming year, from present appearances.

Dr. Orpha D. Baldwin was unanimously elected president of the Homeopathic Medical Society, of Multnomah County, Oregon, at its last meeting. Dr. Baldwin was a graduate of Boston University, in 1885, and has resided in Portland three years. For the past year she has been the attending physician at the Baby Home, where from 30 to 40 orphan children are humanely cared for.

"A Syllabus of Surgery," arranged in conformity with Saunders' American Text Book of Surgery, under the competent authorship of Prof. Nicholas Senn, of Chicago, has just been published. It will be found very valuable by the teacher of surgery and a very handy book for senior students and young practitioners. The usual painstaking work of the author is manifest throughout the book.

Dr. John C. Peters, formerly a well known Homeopathic author but who of late years had gone over to the Allopaths, died in November. Some of his earlier works are really valuable additions to Homeopathic literature, and it is a matter of wonderment how he could have consistently discarded the truths of Homeopathy after having demonstrated them so many times to the satisfaction of himself and the whole profession. He died regretted, but not honored and lamented as would have been the case but for his apostacy.

The new Southwestern Homeopathic Medical College at Louisville is comfortably housed in excellent quarters, has a good faculty, a class of eighteen freshmen, with two weeks of preliminary announcement, and the ladies have formed a Ladies' Homeopathic League which has taken active charge of the dispensary and hospital features of the work. The profession of Louisville and Kentucky are actively engaged in an aggressive and successful campaign for Homeopathy.

The CENTURY was in error in proclaiming Dr. E. H. Pratt ill with kidney disease. He had a light attack of rheumatic fever and took a much needed rest of a few weeks at the home of his father, Leonard Pratt, M.D., San Jose, California, returning greatly improved, his kidneys not the leastwise involved. This will be good news to his thousands of professional friends. The correction is made with unusually great pleasere and we are delighted to know that our information was erroneous.

The *Pacific Coast Journal of Homeopathy* continues to live under the able editorship of Dr. H. R. Arndt, who will be so favorably remembered in connection with the old *Medical Counsellor*, which was, by the way, absorbed by the *Medical Era*, to be in turn absorbed by the MEDICAL CENTURY. For a time it seemed as if the Pacific Coast journal would go by the board for the lack of financial support, but this fear has been dispelled and it comes up smiling with the new year. May it live always to do battle for our cause on the golden shores of the Pacific.

Dr. F. P. Green, Memphis, the surgical brother of his surgical brother, Dr. W. E. Green, Little Rock, recently removed an enlarged cervical gland with the lateral laminae and spinous processes of the second and third cervical vertebrae, successfully. He exposed two inches of the spinal cord, and the pneumogastric and phrenic nerves and carotid artery were also exposed and drawn aside during the operation. It was performed for partial paralysis of the affected side which has disappeared since the operation. Dr. Green will give the CENTURY a detailed report of the case at an early day.

Dr. J. A. Whitman, Beaufort, South Carolina, is another Homeopath who is unalterably opposed to the examining board plan of control. "Continue to fight the examining board scheme;" he writes, "it is ruinous to Homeopathy's interests wherever adopted." Dr. Whitman lives in a state where Homeopaths are as scarce as hen's teeth, and he has been made to feel the iron heel of the oppressor. With Kentucky, Texas, Georgia, Louisiana, Mississippi, Tennessee, West Virginia, Arkansas, North Carolina, South Carolina, and even Alabama opposed at heart, in opposition to the examining board plan of control, it is difficult to conceive just wherein the loyalty of the *Southern Journal of Homeopathy*, under its present management, to the interests of the section it is supposed to represent comes in.

Dr. J. W. Parker, Warsaw, Illinois, is another reader of this journal who subscribes to its position in the matter of legislation. "I cannot understand how any thinking Homeopath can have any other opinion on the subject. I trust you will never let up till you succeed in convincing Editor Price of the awful folly he is committing in giving the examining board plan of control his support." The MEDICAL CENTURY will undertake to do its full duty in these premises without reference to any one editor or any single member of the profession. It favors the least amount of policing of the profession compatible with the safety of the people and the dignity of the profession, and as the examining board plan is the most restrictive, the most paternal and the least desirable in every way it will be opposed with all the vigor that in us is.

The much vaunted Maryland examining board law is proving unsatisfactory, well nigh a failure, in fact, and efforts will be made during the coming session of the legislature to bolster it up. It has been found that irregularity, quackery, as commonly known, and incompetency have been about as rife as ever. That's right, gentlemen! Put the thumb screws on. Protect some one whether they want protection or not. Regulate! Regulate! Regulate! The profession of medicine must needs resolve itself into a private detective force for the states, you know, rather than continue as a scientific and learned profession. Trades unionism

must permeate our every fibre, and if you don't succeed at first in making laws sufficiently stringent just take another "hitch in your gallus" and try again. For shame on us, that we are forever at this effort to regulate and control somebody.

The old school medical society of Ottawa, Illinois, has resolved that it will look backward for a while. It has been the habit of some of the medical men of that pleasant little city to consult with the Homeopathic doctors of the town as opportunity presented, but at a meeting held a few days ago they decided to put the thumb screws down and refuse to see any case hereafter in which the Homeopath had not been formally discharged. There is but little of merit in a consultation between a Homeopath and an Allopath in a strictly medical case at any time, but such an action as the one described shows a degree of narrow mindedness that no educated man should be guilty of. The conscientious Homeopath has no use for Allopathic consultation, anyway, so he will not be the loser by the deal. But 'tis a pity to see professional men make such asses of themselves, nevertheless.

Washington Homeopathic Medical Society, Washington, D. C., recently elected officers for the coming year as follows: President, T. L. McDonald, M.D.; Vice-President, S. Stearns, M.D.; Secretary, Z. B. Babbitt, M. D.; Treasurer, W. R. King, M.D. (no bond); Librarian, Ira W. Dennison, M.D.; and Censors, Drs. G. W. N. Custis, Benjamin F. Gibbs, R. Munson, Richard Kingsman and George R. Wright. An Advisory Board was also chosen as follows: Drs. J. B. G. Custis, W. F. Corey, L. B. Swormstedt and S. Stearns. It is not known how many members there may be who were not elected to office, but since one member's name appears twice in the foregoing list it is supposed there were not enough of them to go all the way round. However, the society is unusually well manned and will look well to the interests it represents. Dr. McDonald is congratulated upon his election to the presidency. So is the society.

All the word being received from Denver at this time indicates a desire on the part of the physicians of the Rocky Mountain metropolis and the Silver State to treat the Institute right royally next summer, and to make the meeting of June one of the memorable meetings of the association's history. It is hoped, however, that the local profession will not feel it incumbent upon themselves to go to a large outlay of money for junketing expenses and thus make the occasion one of unusual hardship upon them. The Institute is a scientific body and will meet for the purpose of improving the profession in the work of healing the sick. And while the social features attendant upon these meetings are features of the first importance it is not necessary that the profession of the various meeting places should make the work of entertainment unnecessarily expensive and laborious. Give us enough of your genuine Western hospitality to leave a good taste in our mouths, but keep within reasonable limits in the matter of expense and outlay of time and labor and the Institute will be perfectly satisfied.

Semi-officially it may be stated that the railroad committee of the American Institute is at work with the railroads East and West with reference to the Denver meeting and it is not unlikely that most favorable rates and most excellent accommodations will be secured. All the Western lines are in active competition for the medical travel of next summer and it is believed the trip across the plains will be made one of enjoyment and pleasure. The Western railroads know how to carry conventions to and from their places of meeting and with true Western enterprise and liberality are already in the field with unusually satisfactory proposals for the journey to Denver and back. Twenty-four to thirty hours on our own trains, with no one but medical men and their families aboard, a genuine Homeopathic special or two, will give the profession a most enjoyable trip and one which no member of the Institute and no prospective member can afford to miss. Make ready early for the pleasure attending the trip to the Denver convention.

The Chicago Physio-Medical College is in a lawsuit with the State Board of Health. It applied before Judge Windes of the circuit court recently for an injunction against the State Board to prevent it from announcing in its annual report that that college is not recognized and that it refuses to issue certificates to graduates without examination. Judge Windes promptly granted the injunction though on what grounds is not stated. Mandamus proceedings were also instituted by a graduate of the college mentioned to compel the Board to accept his fee and issue him a certificate on his diploma. This case is still pending. If the standard of the college is not up to the reasonable requirements of the Board the profession and people will wish for its success in these suits. If, however, it is ruling arbitrarily and high-handedly and is going beyond the reasonable construction of the law under which it operates, it is to be hoped it will not win. The rightful supervision of state health boards is the very best sort of legislation for medicine, but arbitrary action upon the part of such boards is obnoxious to every sense of liberty and justice.

Vierodt's Medical Diagnosis, translated by Stuart, has just passed through the press for the third time. It is an octavo volume of seven hundred pages, with nearly two hundred illustrations, and is got up in the usual good style of the publisher, W. B. Saunders, Philadelphia. The author is professor of physical diagnosis in the University of Heidelberg and his work is among the most painstaking and practical recently set before the profession. The fact that it has rapidly run through three American editions speaks praise for the book and tells a story of value and merit. Careful examination reveals especial interest pertaining to the chapters relating to the circulatory, nervous and digestive systems. The text is unusually clear and comprehensive and the copious illustrations attending these chapters makes their study a pleasure. The student in medicine, the real worker after the truth in practice, will find this work of intrinsic value. The careless reader will not like it, it being so thorough and painstaking and scientific as not to please the casual student. But the physician who likes to know his work well will find in it all that he can well desire in its line.